

ADULT DAY CARE PROGRAM MANUAL



For Adult Day Care Providers regulated by the
Division of Regulation and Licensure

**State of Missouri
Department of Health and Senior Services**

**Division of Regulation and Licensure
Section for Long-Term Care Regulation**

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LIMITATIONS ON USE OF THIS ADULT DAY CARE PROGRAM MANUAL AND DISCLAIMER

The purpose of this Adult Day Care Program Manual is designed to provide guidance and establish uniformity across the state in meeting the requirements of sections [192.2200](#), RSMo to [192.2260](#), RSMo and 19 CSR 30-90 Adult Day Care Program Licensure related to the provision of adult day care.

Nothing in this manual is intended to create nor does it create any enforceable rights, remedies, entitlements or obligations. The Department reserves its right to change or suspend any or all parts of this manual. This manual is constantly being revised so some of the information contained may be outdated. This manual is intended for informational purposes only.

No part of this manual may be reproduced without the prior written consent of the Department of Health and Senior Services, Division of Regulation and Licensure – Section for Long-Term Care Regulation.

GENERAL INFORMATION

Overview of Departments

ADULT DAY CARE PROGRAM LICENSURE – regulated by the Department Of Health & Senior Services (DHSS), Division of Regulation & Licensure-Section for Long-Term Care Regulation (SLCR):

19 CSR 30-90.010 (1): *An adult day care program is a group program designed to provide care and supervision to meet the needs of five (5) or more functionally impaired adults for periods of less than twenty-four (24) hours but more than two (2) hours per day in a place other than the adult's own home.*

A licensed adult day care (ADC) program must comply with all state, county, and city requirements. Occupancy and business permits must be obtained, if required by the county or city in which the center will conduct business in. These permits must be obtained prior to an initial inspection being conducted by the DHSS for licensure.

After approval of an application to operate an ADC program, an initial inspection will be conducted at the ADC program. If the program is in compliance with all licensure regulations during that inspection, the center will receive a license to begin operating.

If you are an ADC provider who does not receive any Medicaid reimbursement you are required to adhere to the regulations outlined in 19 CSR 30-90 and the statutory laws outlined in Chapter 192, RSMo.

- If you have an Alzheimer's special care unit or program which provides a designated separated unit or program for participants with a diagnosis of probable Alzheimer's disease or related disorder, to prevent or limit access by a participant outside the designated or separated area; or that advertises, markets or promotes the adult day care program as providing Alzheimer's or dementia care services, providers are required to comply with 198.515, RSMo – Alzheimer's Special Care Services Disclosure.

- ➔ Weblinks:

DHSS-Division 30, Division of Regulation and Licensure, Chapter 90 Adult Day Care Program Licensure:

<http://www.sos.mo.gov/adrules/csr/current/19csr/19csr.asp>

Missouri Revised Statutes (RSMo):

<http://revisor.mo.gov/main/Home.aspx>

Refer To **"OPENING AN ADULT DAY CARE PROGRAM" Flow Charts** (pre-inspection, post-inspection, and change of operator - see appendix)

MEDICAID REIMBURSEMENT

ADULT DAY CARE SERVICES – Overview DHSS Division of Senior & Disability Services, Missouri Department of Social Services - MO HealthNet Division, and Missouri Medicaid Audit and Compliance.

ADC services provide the continuous care and supervision of disabled adults in a licensed ADC setting for up to ten (10) hours per day for a maximum of five (5) days per week. These services include, but are not limited to, assistance with activities of daily living, planned group activities, food services, client observation, skilled nursing services as specified in the individual's plan of care, and transportation. ADC services are provided by licensed ADC programs enrolled as a MO HealthNet provider.

ADC services are available to Medicaid eligible participants who meet the nursing facility level of care and have been approved to participate in the ADC Waiver or the Aged and Disabled Waiver by the Department of Health and Senior Services, Division of Senior and Disability Services (DSDS). The ADC Waiver and the Aged and Disabled Waiver are Home and Community Based (HCB) Medicaid Waivers operated by the DSDS. In order for ADC providers to be reimbursed by MO HealthNet, all ADC services must be prior authorized by DSDS.

ENROLLMENT AS A MO HEALTHNET ADULT DAY CARE PROVIDER

ADC programs must enroll with the Department of Social Services (DSS), Missouri Medicaid Audit and Compliance Unit (MMAC) in order to be reimbursed for services provided to MO HealthNet Waiver participants. Each location providing ADC services to MO HealthNet participants must enroll with MMAC separately.

In order to enroll as a MO HealthNet Provider you must apply for a National Provider Identifier (NPI). The Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) required the adoption of standard unique identifiers for health care providers and health plans. The purpose of these provisions was to improve the efficiency and effectiveness of the electronic transmission of health information.

The Centers for Medicare & Medicaid Services (CMS) has developed the National Plan and Provider Enumeration System (NPPES) to assign these unique identifiers. Adult Day Care programs may apply for an NPI at the following link:

<https://nppes.cms.hhs.gov>

Information regarding MO HealthNet enrollment forms and required information that must be submitted to MMAC is located at the following link:

<http://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services>

Completed enrollment packets are submitted to MMAC at:

MMAC Provider Contracts
205 Jefferson Street, Second Floor
P.O. Box 6500
Jefferson City, MO 65102-6500
Fax (573) 751-5065

Upon receipt of the required documents MMAC will review and make a determination. On average, it is approximately six (6) months from the time a proposal is submitted and the provider can begin serving participants. This timeframe can take much longer depending on the quality of the submitted information, the amount of additional or revised information that must be submitted and the current workload of MMAC staff. The ADC will be notified via email if additional information is needed or the application is finalized and approved.

If you have questions or need assistance completing the enrollment forms, please contact Provider Contracts via email at: mmac.ihscontracts@dss.mo.gov.

Once an ADC program has been enrolled as a MO HealthNet ADC provider, the provider information will be added to the MO HealthNet provider list. This provider will then be available for selection by waiver participants who are determined eligible and authorized for ADC services offered through the ADC Waiver or Aged and Disabled Waiver.

PRIOR AUTHORIZATION OF ADULT DAY CARE SERVICES

All ADC services must be prior authorized by the DSDS before services are provided in order to be paid by MO HealthNet. The DSDS is responsible for the following activities: *intake of referrals, conducting assessments of nursing facility level of care and authorization of services through person centered care planning.*

In order to make an initial referral for ADC Services, contact DSDS by phone at: (866) 835-3505. Initial referrals will be processed with fifteen (15) business days.

Requests for changes in a participant's care plan for those participants already receiving adult day care services must be made by contacting the appropriate Regional Evaluation (REV) Team. The REV Teams can be located by accessing the following link:

<http://health.mo.gov/seniors/homecomservices/pdf/BHCS-EvalTeam.pdf>

Information regarding prior authorized services may be found on the Home and Community Based Services (HCBS) Web Tool. The HCBS Web Tool provides a web portal that gives HCB providers access to a participants' screening, assessment(s), and prior authorization(s) for Medicaid funded HCBS. More information about the HCBS Web Tool may be found at:

<http://www.health.mo.gov/seniors/hcbs/>

ADC services are authorized and billed in units. Each unit represents a fifteen (15) minute block of provided service. ADC services may be authorized up to ten (10) hours per day for a maximum of five (5) days per week. No more than 8 units (two (2) hours) daily, of the authorized units, will be reimbursed for transporting the participant to and from the facility.

MO HEALTHNET ADULT DAY CARE SERVICES – PROGRAM MANUALS

If you are an ADC provider who receives Medicaid reimbursement you are required to comply with all regulations contained in 19 CSR 30-90 Adult Day Care Program Licensure and the standards outlined in the applicable MO HealthNet ADC Waiver or Aged and Disabled Waiver Manual.



MO HealthNet enrolled ADC providers must be aware of program requirements as provided in the program manuals. These manuals may be found as follows.

MO HealthNet Adult Day Care Waiver Manual:

<http://manuals.momed.com/manuals/>

MO HealthNet Aged and Disabled Waiver Manual:

<http://manuals.momed.com/manuals/>

PARTICIPANT ELIGIBILITY FOR MO HEALTHNET

The Department of Social Services, Family Support Division, determines eligibility for MO HealthNet benefits. Information regarding eligibility and the application for MO HealthNet for the Aged, Blind and Disabled is available at the following link:

<https://mydss.mo.gov/healthcare>

Information regarding local Family Support Division offices is available under the drop down for Food, Health Care and Family Care at the following link:

<http://dss.mo.gov/offices.htm>

The Division may be reached at (855) 373-4636 (7am to 6pm) or (800) 392-1261 for the automated line.

EDUCATION FOR NEW MO HEALTHNET PROVIDERS

Valuable information for MO HealthNet providers can be found at the Provider Participation page of the MO HealthNet website. You may browse this site to view Provider Frequently Asked Questions (FAQs), Education and Training, Manuals, Bulletins and Hot Tips at the following link:

<http://dss.mo.gov/mhd/providers/>

Provider representatives are available to train providers and other groups on proper billing practices as well as educating them on MO HealthNet programs and policies. In order to discuss training options, contact the provider education unit at (573) 751-6683, or email at mhd.provtrain@dss.mo.gov. Scheduled training webinars and workshops are also available.

The following link provides dates, times, and locations of upcoming workshops:

<https://dss.mo.gov/mhd/providers/education>

BILLING MO HEALTHNET

Prior authorized ADC services provided for MO HealthNet eligible participants may be billed to MO HealthNet. These claims are billed through the EMOMED system. EMOMED is accessible at the following link:

[https://www.emomed.com.](https://www.emomed.com)

You must register for EMOMED access to bill electronically. For electronic billing assistance you may contact Wipro Infocrossing Healthcare Services, Inc. Help Desk at (573) 635-3559 or email address: internethelpdesk@momed.com. Providers may call or send an e-mail for help in establishing the required electronic claims format, network communication, or assistance with the MO HealthNet billing web site and other simple help tips.

Providers billing MO HealthNet for services are paid depending upon the financial cycle when the claim was processed. A listing of the claims processing schedule is located at the following link:

<http://manuals.momed.com/ClaimsProcessingSchedule.html>

MO HEALTHNET PROVIDER COMMUNICATION

MO HealthNet providers may call the Interactive Active Voice Response System (IVR) at (573) 751-2896. The IVR provides answers to such questions as participant eligibility, last two check amounts, and claim status using a touch-tone telephone. Anytime during the IVR options, you may select "0" to speak to the next available specialist. Your call will be put into a queue and will be answered in the order it was received. Providers should utilize Provider Communication as their first point of contact for inquiries, concerns, and questions regarding proper claim filing, claims resolution and disposition, and participant eligibility questions and verifications.

Providers may send and receive secure e-mail inquiries through the MO HealthNet web portal at EMOMED.com. Once you have logged on to the e-provider page, click on Provider Communications Management to send inquiries, or questions regarding proper claim filing instructions, claims resolution and disposition, and participant eligibility file problems. Providers may send one inquiry per e-mail.

Written inquiries are also handled by the Provider Communications Unit and can be mailed to the following address:

Provider Communications Unit
PO Box 5500
Jefferson City, MO 65102-5500

MO HEALTHNET PROVIDER REVIEW

MMAC, Provider Review Group is responsible for reviewing and monitoring statewide utilization and program compliance of MO HealthNet providers. The Provider Review Group conducts post payment reviews and investigates complaints regarding MO HealthNet Providers. These reviews may be either at the providers' facility or may be through desk review (where records are requested through the mail).

Information regarding this process may be found at:

<http://mmac.mo.gov/providers/provider-reviews/>

DEVELOPMENTAL DISABILITIES (DD) MEDICAID WAIVER PROGRAM (INDEPENDENT LIVING SKILLS DEVELOPMENT (ILSD))

- regulated by the

Department of Mental Health (DMH), Licensure and Certification Unit

Independent living skills development focuses on skill acquisition/development, retention/maintenance to assist the individual in achieving maximum self-sufficiency. This service assists the individual to acquire, improve and retain the self-help, socialization and adaptive skills necessary to reside successfully in home and community-based settings. A provider is not required to make services available in a stand-alone facility to provide this service, but may choose only to provide the Home Skills Development and Community Integration components of this service.

Day services are provided at a stand-alone licensed or certified day program facility, which is not physically connected to the individual's residence. Day services assist the individual to acquire, improve and retain the self-help, socialization, adaptive, and life skills necessary at home or in the community. Costs for transporting the individual from their place of residence to the day program site are not included in the day service rate, and waiver transportation may be provided and separately billed.

DMH Certification survey instrument website:

<http://dmh.mo.gov/dd/provider/docs/certificationsurvey.pdf> **NOTE:** This survey instrument is in the process of revision. Notification will be provided if this weblink address changes.

Code of State Regulations (CSRs) for DMH Certification - Chapter 5 - *Standards for Community-Based Services*:

<https://www.sos.mo.gov/cmsimages/adrules/csr/current/9csr/9c45-5.pdf>

CSRs for DMH Licensure:

<https://www.sos.mo.gov/cmsimages/adrules/csr/current/9csr/9c40-9.pdf> Chapter 9 - *Rules for Day Programs Serving People Who Are Mentally Retarded and Developmentally Disabled*

<https://www.sos.mo.gov/cmsimages/adrules/csr/current/9csr/9c40-10.pdf> Chapter 10 - *Rules for Day Programs Serving People Who Are Mentally Ill or Mentally Disordered*



If you are a provider dually licensed by both DMH and DHSS you are required to adhere to all regulations contained in DMH regulations at 9 CSR 45-5 Certification* or 9 CSR 40-9 or 9 CSR 40-10 Licensing*, and DHSS regulations at 19 CSR 30-90 Adult Day Care Program Licensure. **When the regulation(s) conflict, the provider is required to comply with the more stringent regulation(s).**

In addition, you must comply with the standards outlined in the MO HealthNet Developmental Disabilities (DD) Waivers Manual. ***Clarification:** A provider can apply for either certification of a waiver service such as ILSD or a license for a business such as a Day Program. Since the ILSD is a certified waiver service, providers must comply with the standards in 9 CSR 45-5. If a business opens a Day Program for either the developmentally disabled or mentally ill the business is required to apply for a DMH license and comply with the standards in 9 CSR 40-9 or 9 CSR 40-10.

DHSS-Division 30, Division of Regulation and Licensure, Chapter 90 Adult Day Care Program Licensure: <http://www.sos.mo.gov/adrules/csr/current/19csr/19csr.asp>

MO HealthNet DD Waivers Manual: <http://manuals.momed.com/manuals/>

IF YOU WISH TO BECOME A PROVIDER THROUGH DMH CONTACT:

Office of Licensure and Certification
PO Box 687
Jefferson City, MO 65102
(573) 751-4024

THE CHILD AND ADULT CARE FOOD PROGRAM (CACFP) – administered by the DHSS.

CACFP provides meal reimbursement to eligible adult day care centers. The target population of this program is elderly and functionally impaired adults, 18 years of age or older and adults 60 years of age or older who are unable to live independently or perform activities of daily living. Functionally impaired adults include victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction, who are physically or mentally impaired to the extent that their capability for independence and ability to carry out functions of daily living is markedly limited.

Eligible facilities must serve meals meeting eligibility requirements; maintain accurate and complete records; operate a nonprofit food service, train center personnel in program requirements and operations; and collect income eligibility information on all participants claimed as free or reduced.

ELIGIBILITY REQUIREMENTS

To participate in CACFP, an adult day care facility must be licensed by an approved state or federal authority and be nonresidential. In other words, the same participants cannot be maintained in care for more than 24 hours on a regular basis.

DHSS CHILD AND ADULT CARE FOOD PROGRAM WEBLINK:

http://health.mo.gov/living/wellness/nutrition/foodprograms/cacfp/adult_care.php

The DHSS CACFP provides reimbursement for allowable meals served; provides technical assistance on nutrition, food service operations, program management, and recordkeeping; and reviews and monitors program services to ensure good nutrition for all enrolled participants. For assistance, contact:

Community Food and Nutrition Assistance

Missouri Department of Health and Senior Services
PO Box 570
Jefferson City, MO 65102
Telephone: 573-751-6250 or
(Toll-free) 800-733-6251
Email: CACFP@health.mo.gov

DHSS LICENSURE REQUIREMENTS

19 CSR 30-90.020 establishes the general licensure and application procedures, fees, and the rights of applicants for licensure of adult day care programs. **✓ REMINDER:** *Providers need to review these requirements in their entirety at: <http://www.sos.mo.gov/adrules/csr/current/19csr/19csr.asp>*

Refer To ***“OPENING AN ADULT DAY CARE PROGRAM” Flow Charts*** (pre-inspection, post-inspection, and change of operator - see appendix)

Licensure requirements in this section include the following:

- Who is required to be licensed;
- Application documentation for submission;
- Alzheimer's special Care unit or program requirements;
- Fee amount required;
- Who is exempt from adult day care licensure;
- DHSS review of application and investigation of applicants;
- Regular license time frame;
- Provisional license – issuance standards;
- Licensure renewals;
- Revocation of license;
- Administrative Hearing Commission request;
- License: non-transferable;
- Application signature and notarization;
- Exceptions granted to regulations

■ **REMINDER:** ADC programs receiving Medicaid waiver funding through DHSS or DMH or federal reimbursements are also required to comply with those program requirements.

■ **When the regulation(s) conflict, the provider is required to comply with the more stringent regulation(s).**

DHSS STAFFING REQUIREMENTS

19 CSR 30-90.040 establishes the minimum requirements for adult day care program staff, ratio of numbers of staff to participants and staff training. ✓ **REMINDER:** *Providers need to review these requirements in their entirety*
at: <http://www.sos.mo.gov/adrules/csr/current/19csr/19csr.asp>

Program staff requirements in this section include the following:

- ADC provider responsible for assuring compliance with applicable laws and rules;
- Program Director responsibilities and qualifications;
- Direct care staff minimum age and qualification standards;
- Volunteer qualifications;
- Direct care staffing requirements;
- Calculating staffing ratios;
- Staff ability to perform job duties;
- Direct care staff – free of communicable disease;
- Written approval to return to duty after diagnosis of communicable disease;
- Program Director -monitor health of employees;
- Not employable due to abuse or neglect of patients;
- Employee disclosure requirements;
- Employee disqualification list – periodic checks-Family Care Safety Registry (FCSR);
- Criminal background check requirements;
- FCSR registration requirements for employees;
- Provider requirements when using individuals listed on the EDL;
- Good cause waiver requirements;
- Cardiopulmonary resuscitation (CPR) and First Aid certification requirements, training sources, renewals;
- First Aid training requirements;
- Staff orientation requirements;
- In-service training requirements;

■ **REMINDER:** ADC programs receiving Medicaid waiver funding through DHSS or DMH or federal reimbursements are also required to comply with those program requirements.

■ **When the regulation(s) conflict, the provider is required to comply with the more stringent regulation(s).**

DHSS PROGRAM POLICIES AND PARTICIPANT CARE

19 CSR 30-90.050 establishes the minimum requirements for operating an adult day care program; providing care to participants; establishing and preserving certain rights of participants; and requiring adult day care providers to have written program policies. ✓ **REMINDER:**
Providers will need to review these requirements in their entirety
at: <http://www.sos.mo.gov/adrules/csr/current/19csr/19csr.asp>

Program policies and participant care and rights requirements in this section include:

- Admitting or continuing to care for participants;
- Emergency medical plan standards;
- Medical assessment requirements;
- Individual plan of care requirements;
- Communication with certain individuals;
- Reporting abuse or neglect;
- Offer certain services and requirements – activities of daily living; group activities; food service; observation;
- Optional services to offer and their requirements: transportation, counseling services; rehabilitation services; medical services;
- Participant rights requirements;
- Advising participants and families of rights and policies requirements;
- Posting of participant rights;
- Written program description;

■ **REMINDER:** ADC programs receiving Medicaid waiver funding through DHSS or DMH or federal reimbursements are also required to comply with those program requirements.

■ **When the regulation(s) conflict, the provider is required to comply with the more stringent regulation(s).**

DHSS RECORD KEEPING REQUIREMENTS

19 CSR 30-90.060 establishes the minimum requirements for administrative, participant and program records that an adult day care provider is required to maintain. ✓ **REMINDER:**
Providers will need to review these requirements in their entirety
at: <http://www.sos.mo.gov/adrules/csr/current/19csr/19csr.asp>

Record keeping requirements in this section include the following:

- Administrative records requirements;
- Individual participant record requirements;
- Maintain program records
- Time frame for record keeping;

■ **REMINDER:** ADC programs receiving Medicaid waiver funding through DHSS or DMH or federal reimbursements are also required to comply with those program requirements.

■ **When the regulation(s) conflict, the provider is required to comply with the more stringent regulation(s).**

DHSS FIRE SAFETY AND FACILITY PLANT REQUIREMENTS

19 CSR 30-90.070 establishes the minimum fire safety, physical plant, and maintenance requirements for buildings in which adult day care programs are operated. ✓ **REMINDER:**
Providers will need to review these requirements in their entirety
at: <http://www.sos.mo.gov/adrules/csr/current/19csr/19csr.asp>

Fire safety and facility physical requirements section include the following:

- Building construction requirements;
- Space requirements;
- Rooms provided and size;
- Furniture;
- Bed;
- Equipment and supplies
- Ventilation;

- Heating system;
- Temperatures;
- Illumination;
- Plumbing;
- Water supply;
- Drinking water;
- Toilets and handwashing sinks;
- ADA compliance;
- Rugs and floor coverings;
- Maintenance;
- Cleaning supplies;
- Wastebaskets;
- Pest free;
- Approval from fire officials or comply with Life Safety Code;
- Exits
- Smoke detection
- Fire extinguishers;
- Written emergency plan;
- Fire drills;
- Responsibilities of fire drills and other emergency preparedness.

- **REMINDER:** ADC programs receiving Medicaid waiver funding through DHSS or DMH or federal reimbursements are also required to comply with those program requirements.
- **When the regulation(s) conflict, the provider is required to comply with the more stringent regulation(s).**

DHSS WEBSITE

By visiting www.health.mo.gov you can find information on:

- Adult Day Care Provider Directory
- Frequently Asked Questions
- Application for License to Operate an Adult Day Care Program
- Adult Day Care Program Manual

ADULT DAY CARE PROGRAM – AT A GLANCE

For your ease, we have included this reference guide to assist you in the day-to-day operations of your program.

WHO DO I CONTACT FOR QUESTIONS ABOUT:

DEPARTMENT	TELEPHONE	EMAIL/WEB ADDRESSES
DHSS Quality Assurance Unit <ul style="list-style-type: none">▪ Informal Dispute Resolution process	(573) 526-8608	Steven.Vest@health.mo.gov
DHSS Licensure & Certification Unit <ul style="list-style-type: none">▪ Opening an ADC program▪ Licensing an ADC program▪ Change of operator▪ Location change▪ Application changes (e.g., hours, days)	(573) 526-8508	LTCapplication@health.mo.gov
DHSS Engineering Consultation Unit <ul style="list-style-type: none">▪ Preliminary floor plan review	(573) 526-8524	ECU@health.mo.gov
DHSS Regulation Unit <ul style="list-style-type: none">▪ Requesting an exception(s) to ADC regulations - 19 CSR 30-90▪ Regulation questions – 19 CSR 30-90	(573) 526-8524	RegulationUnit@health.mo.gov
DHSS- Community Food & Nutrition Assistance (CACFP)	800-733-6251 (573) 751-6250	CACFP@health.mo.gov
ELDER ABUSE & NEGLECT HOTLINE	800-392-0210	N/A
Local Health Department <ul style="list-style-type: none">▪ Communicable disease reporting▪ Sanitation inspections	See weblink	http://health.mo.gov/living/lpha/lphas.php
Missouri Medicaid Audit & Compliance (MMAC) <ul style="list-style-type: none">▪ Provider Enrollment▪ Provider Review	(573) 751-3399	MMAC.ProviderEnrollment@dss.mo.gov http://mmac.mo.gov/contact-us/
DSS-Family Support Division <ul style="list-style-type: none">▪ Medicaid eligibility inquiries for participants	(855) 373-4636 (7am to 6pm) (800) 392-1261 for the automated line.	http://dss.mo.gov/fsd/ http://dss.mo.gov/mhk/appl.htm http://dss.mo.gov/offices.htm
MO HealthNet Division (MHD) <ul style="list-style-type: none">▪ Provider communications	(573) 751-2896	N/A
DMH <ul style="list-style-type: none">▪ Licensure▪ Certification	(573) 751-4024	N/A

DHSS FREQUENTLY ASKED QUESTIONS

► **REMINDER:** Providers need to review 19 CSR 30-90 requirements in their entirety at: <http://www.sos.mo.gov/adrules/csr/current/19csr/19csr.asp> ADC programs receiving Medicaid waiver funding through DHSS or DMH or federal reimbursements are also required to comply with those program requirements.

MAY I BEGIN PROVIDING ADC SERVICES TO PARTICIPANTS BEFORE I AM LICENSED BY DHSS?

You may provide services to no more than four (4) individuals in your ADC program without a license.

IF I SUBMITTED AN APPLICATION AND MY FLOOR PLAN WAS NOT APPROVED FOR A LICENSE, MAY I SUBMIT A NEW FLOOR PLAN FOR A DIFFERENT LOCATION, WITHOUT SUBMITTING ANOTHER APPLICATION?

No. If you decide to change locations, you must submit a new application.

IF I DECIDE TO CHANGE LOCATIONS – MAY I USE MY CURRENT LICENSE FOR THAT LOCATION?

No. A license to operate is only good for the location listed on the license. If you want to change locations you must complete the entire application process PRIOR to moving participants and operating in the new location.

I AM LICENSED BY DHSS AND DMH. SOME OF THE REQUIREMENTS ARE DIFFERENT FOR EACH PROGRAM. HOW DO I KNOW WHAT REGULATION I SHOULD FOLLOW?

In order to be in compliance with both programs, you need to ensure that you are in compliance with the most stringent requirements at all times. For instance, DMH regulation staffing ratios are more stringent than DHSS regulation staffing ratios. In order to be in compliance with both programs, you would need to staff with the higher ratios at all times.

ARE THERE ANY GRANTS AVAILABLE TO ASSIST WITH FUNDING FOR MY ADC PROGRAM?

DHSS is not aware of any organizations available to assist with the completion of a proposal or any grants available to defray the cost of starting a business.

HOW SOON AFTER I AM LICENSED WILL PARTICIPANTS BE PLACED INTO MY PROGRAM?

State agencies do not place clients in ADC programs. We also do not recommend one ADC program over another to participants.

HOW DO I CHANGE MY OPERATING HOURS ON MY LICENSE?

Please submit a letter requesting the change in hours, with the director's signature, to Section for Long-Term Care Regulation, Licensure and Certification Unit, P.O. Box 570, Jefferson City MO 65102. A revised license will be sent to the ADC program.

HOW DO I APPLY TO BE A MEDICAID PROVIDER FOR ADULT DAY CARE OR AGED/DISABLED WAIVER SERVICES?

If an ADC wants to become a provider for ADC or Aged/Disabled Waiver Services, you will want to do the following:

- ✓ Establish a National Provider Identifier number: <https://nppes.cms.hhs.gov>
- ✓ Review Medicaid enrollment process and complete the enrollment package:
<http://mmac.mo.gov/providers/provider-enrollment/home-and-community-based-services/>
- ✓ Questions, contact Missouri Medicaid Audit and Compliance (MMAC): 573-751-3399
Email: MMAC.IHSCONTRACTS@DSS.MO.GOV

WHERE DO I FIND OUT MORE INFORMATION ON THE ADULT DAY CARE FOOD PROGRAM?

The Child and Adult Care Food Program (CACFP) provides meal reimbursement to eligible adult day care centers. To determine if your center is eligible and/or to apply, review the following information:

http://health.mo.gov/living/wellness/nutrition/foodprograms/cacfp/adult_care.php

Questions, contact the **Community Food and Nutrition Assistance program:**

Telephone: 573-751-6250 or

(toll-free) 800-733-6251

Email: CACFP@health.mo.gov

CAN A LICENSED NURSE PRACTITIONER PERFORM THE MEDICAL ASSESSMENT AND SIGN THE PHYSICIAN'S ORDERS IN LIEU OF THE PHYSICIAN?

If the licensed Nurse Practitioner is acting as the “physician’s designated agent”, then yes, he/she can perform and sign the medical assessment: 19 CSR 30-90.050 (3).

No, a licensed Nurse Practitioner cannot sign physician’s orders in lieu of the physician: 19 CSR30-90.050 (8) (D) B. Medications or treatments may not be administered without an order signed by a licensed physician.

WHAT IS THE REQUIREMENT FOR A NURSE IN AN ADC PROGRAM?

In SLCR’s regulations related to ADC, there are specific regulations that indicate when an ADC would need to have a nurse perform a duty. These include:

- ✓ Reviewing modified diets every 6 months (if modified diets are provided at the ADC) - can also be completed by a qualified dietitian or the physician.
- ✓ Administration of medications/system of medication distribution or physician ordered treatments, and communication with physician related to medication/treatments. 19 CSR 30-90.050 (8) (D).

The ADC is also required to provide the appropriate type and number of personnel to care for persons in their ADC, in accordance with their plan of care. If the plan of care required a service that would be recognized as a nursing service (such as tube feeding, colostomy care, etc) then the inspectors would review the participant's plan of care to determine how this is being implemented. Otherwise, in an ADC that offers medical services, the nurse would need to be "available", but that may or may not require him/her to be onsite at all times. Again, whether a nurse is required to be physically onsite is dependent on the care needs and care plans of the individual participants you serve.

WHO CAN PASS MEDICATIONS IN AN ADC?

19 CSR30-90.050 (8) (D): The licensed nurse shall be the only individual authorized to receive, control and manage the medication and drug program. The licensed nurse shall be responsible for the following:

1. A safe, effective system of identifying, handling and storing each participant's medications.
2. A system for administering and storing medications that is reviewed not less than every ninety (90) days by a licensed nurse.
3. Administration of medications and treatments..."

➤ Can a Certified Medication Technician or Aide (CMT or CMA)? No
➤ Can a Level I Medication Aide? No
➤ Can a Physician or Pharmacist? Yes

WHAT ASSOCIATIONS ARE INVOLVED IN ADULT DAY CARE PROGRAMS?

- The Missouri Adult Day Services Association (MOADSA)
2420 Hyde Park, Suite A
Jefferson City, MO 65109
(573) 634-3566
- Missouri Alliance for Home Care (MAHC)
2420 Hyde Park, Suite A
Jefferson City, MO 65109
(573) 634-7772
- Missouri Association of Rehabilitation Facilities (MARF)
205 E. Capital Ave., Suite 100
Jefferson City, MO 65101
(573) 635-1631
- Missouri Assisted Living Association (MALA)
2707B Hyde Park Rd.
Jefferson City, MO 65109
(573) 635-8750

 LeadingAge Missouri
3412 Knipp Dr. Suite 102
Jefferson City, MO 65109
(573) 635-6244

 Missouri Association of Nursing Home Administrators (MANHHA)
4100 Country Club Dr.
Jefferson City, MO 65109
(573) 635-5345

 Missouri Health Care Association (MHCA)
236 Metro Dr.
Jefferson City, MO 65109
(573) 893-2060

APPENDIX DOCUMENTS

(Includes SLCR ADC policies, forms, provider letters, emergency/disaster preparedness templates, inspection checklists, ADC application, flow charts, regional maps, 19 CSR 30-90 regulations, ADC statutes)

- Adult Day Care Licensure Administrative Policies – SLCR
 - 800.00 Adult Day Care Licensure
 - 800.00A Application for License to Operate An Adult Day Care
 - 801.00 Full Annual Inspection for Adult Day Care Programs
 - 801.00A Inspection Report
 - 801.00C Inspection Checklist (MO-2657)
 - 802.00 Second Inspections for Adult Day Care Programs
 - 803.00 Adult Day Care Program Complaints
 - 803.00A Timelines for Complaint Investigations
 - 804.00 Assuring Compliance in Adult Day Care Programs
 - 805.00 Adult Day Care Informal Dispute Resolution Conference
- Adult Day Care Inspection Checklist -SLCR Adult Day Care Inspector's manual
- Form letters sent to providers during inspection process – SLCR
 - Accepted Plan of Correction
 - Inspection, No Deficiencies
 - Plan of Correction Not Received
 - Rejected Plan of Correction
 - Revisit
 - Statement of Deficiencies
- Opening an Adult Day Care Program (pre-inspection) Flow Chart – SLCR
- Opening an Adult Day Care Program (post-inspection) Flow Chart – SLCR
- Change of Operator - Adult Day Care Flow Chart -SLCR
- Tuberculosis Flow Chart for Employees – SLCR
- Emergency Preparedness Template – example
- Disaster and Emergency Preparedness Checklist - example
- Regional Map – SLCR
- Regional Map – DSDS
- Regulations 19 CSR 30-90 Adult Day Care Program Licensure
- Statutes 192, RSMo. – Adult Day Care Program (*reformatted by SLCR*)
- Statutes 198.515, RSMo. – Alzheimer's Disclosure information documents required

ADMINISTRATIVE POLICY AND PROCEDURE MANUAL

SECTION FOR LONG-TERM CARE REGULATION

Effective: 2/23/07

Revised: 2/23/07

SECTION VIII

POLICY #800.00

Adult Day Care Licensure

Policy approved by: _____ Date: _____

Administrator, Section for Long-Term Care Regulation

POLICY: Adult Day Care (ADC) Licensure Requirements

As required by Section 660.403, RSMo, the Missouri Division of Regulation and Licensure (DRL) Section for Long-Term Care Regulation (SLCR) shall review applications for ADC programs to ensure the applicant has completed the application process; and SLCR shall conduct the inspections needed to license ADC programs that meet the minimum standards for insuring the health and safety of the participants.

19 CSR 30-90.010 DEFINITIONS

1. **Applicant** means any person, corporation, partnership, association or organization which has submitted an application to operate an ADC program, but has not yet been approved and issued a licensed or provisional license by SLCR.
2. **Program director** means the individual person responsible for the on-site general administration of the ADC program.

PROCEDURE

1. **Application Process**
 - The applicant applying for an ADC program license must request an application packet from the SLCR Licensure and Certification Unit.
 - SLCR Licensure and Certification Unit will send a packet to the applicant. The packet consists of an Application for Licensure to Operate an Adult Day Care Program (Form MO-580-2738 (2/07) provided by SLCR (See Attachment A) and instructions for the applicant to submit a fee and floor plan with the application form.
 - Central office staff shall review the application for completeness, determine if the floor plans meet the standards for approval and inform the regional office manager or his or her designee that the application for a license has been filed.
2. **Initial Inspection Process**
 - Regional office staff shall 1) receive a written confirmation of the approved application from central office; 2) contact the program director/ designee to confirm that the program is ready to be inspected; and 3) schedule the inspection with the program director/ designee.

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SECTION FOR LONG-TERM CARE REGULATION

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POLICY #800.00

Adult Day Care Licensure

- Regional office staff shall conduct the initial inspection as soon as possible, but no later than within three weeks of contact with the operator or program director.
- The initial inspection process shall include a licensure inspection for compliance including the decision-making and exit conference procedures as outlined under Policy #801.00, as applicable.
- If the ADC is newly built, regional office staff shall assure that any requirements, placed on the building by the Engineering Consultation Unit Manager or his/ her designee are met prior to or at the time of the initial inspection.
- When it has been determined that the program is in compliance with all regulations, the program shall be issued a regular license not to exceed two years.

3. Licensure Program Inspections

- Regional office staff shall conduct at least two inspections of each licensed ADC program per fiscal year. Inspections must be scheduled on dates that ensure one inspection is conducted for each half of that fiscal year. At least one of these inspections shall be unannounced.
- Every effort must be made to reduce predictability in the inspection process, including scheduling the inspections in a different month than was done the previous year.

4. Re-licensure

- For re-licensure, an inspection shall be conducted within ninety (90) days prior to the expiration date of the current license.

5. Provisional Licenses

- As required by **Section 660.403 (6), RSMo**, SLCR may issue a provisional license to an ADC program that is not currently meeting all requirements for a license but which demonstrates the potential capacity to meet full requirements for license; except that no provisional license shall be issued unless the Engineering Consultation Unit Manager or his/ her designee is satisfied that the operation of the ADC program is not detrimental to the health and safety of the participants being served. The provisional license shall be nonrenewable and shall be valid for the period designated by SLCR, which period shall not exceed six months from the date of issuance.
- When the program director/ designee has determined that the program meets all provisions of the regulations, he or she shall contact the SLCR regional manager

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Adult Day Care Licensure

or SLCR regional manager's designee to arrange a revisit to review for compliance.

- Upon issuance of a regular license, a day care program's provisional license shall immediately be null and void.

6. Change of Operator

- When an application is received for a change in operator, the Licensure and Certification Unit will issue a new regular license after verifying the following: 1) The Licensure and Certification Unit has an approved application; 2) SLCR staff have conducted a licensure inspection of the program within the prior ninety (90) days and found the program in compliance; and 3) There are no outstanding deficiencies or complaint investigations that are likely to result in noncompliance.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF REGULATION AND LICENSURE
SECTION FOR LONG TERM CARE REGULATION
APPLICATION FOR LICENSE TO OPERATE AN ADULT DAY CARE PROGRAM

RETURN COMPLETED APPLICATION AND APPLICATION FEE TO: Division of Regulation and Licensure Adult Day Care Licensure Program/Fee Receipt Unit P.O. Box 570 Jefferson City, MO 65102-0570		DO NOT WRITE IN THIS SPACE	
		<input type="checkbox"/> New Facility	<input type="checkbox"/> Renewal
		<input type="checkbox"/> Change of Owner	
		PROVISIONAL LICENSE NO.	ISSUED
IN ACCORDANCE WITH THE REQUIREMENTS OF SECTIONS 660.400 THROUGH 660.420 RSMO (2000) AND 19CSR 30-90.080, AN APPLICATION IS HEREBY MADE FOR LICENSURE TO ESTABLISH, CONDUCT OR MAINTAIN AN ADULT DAY CARE PROGRAM AS: (CHECK ONE)		REGULAR LICENSE NO.	ISSUED
<input type="checkbox"/> Free Standing Adult Day Care Program <input type="checkbox"/> Associated Adult Day Care Program List Name of Associated Organization: _____		EFFECTIVE DATE	EXPIRATION DATE
		DATE FEE RECEIVED	AMOUNT
PROGRAM CAPACITY		CHECK/MONEY ORDER NUMBER	
1. FEE SCHEDULE – CHECK LICENSE CAPACITY REQUESTED <input type="checkbox"/> 8 or Fewer - \$25.00 <input type="checkbox"/> 9 through 16 - \$50.00 <input type="checkbox"/> 17 through 24 - \$75.00 <input type="checkbox"/> 25 or more - \$100.00			
2. NAME OF ADULT DAY CARE PROGRAM		TELEPHONE NUMBER ()	COUNTY (OR CITY OF ST. LOUIS)
ADDRESS OF ADULT DAY CARE PROGRAM			
3. IF A CHANGE OF OWNERSHIP, FORMER NAME OF ADULT DAY CARE PROGRAM			
4. TYPE OF PROVIDER OF THE ADULT DAY CARE PROGRAM (CHECK ONE) Governmental Not-For-Profit Proprietary <input type="checkbox"/> City <input type="checkbox"/> Religious Organization <input type="checkbox"/> Individual <input type="checkbox"/> County <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> State <input type="checkbox"/> Other: _____ <input type="checkbox"/> Corporation			
5. NAME OF PROVIDER		TELEPHONE NUMBER ()	COUNTY (OR CITY OF ST. LOUIS)
ADDRESS OF PROVIDER			
6. NAME, ADDRESS AND PERCENTAGE OF OWNERSHIP OF ANY INDIVIDUAL OR ENTITY WHO OWNS AN INTEREST OF FIVE PERCENT (5%) OR MORE IN THE LAND, STRUCTURE(S), MORTGAGE OR OTHER OBLIGATION, OR LEASE ON WHICH AN ADULT DAY CARE PROGRAM IS BEING CONDUCTED. INDICATE WHETHER THIS OWNERSHIP INVOLVES LAND, STRUCTURE(S), MORTGAGE OR LEASE.			
7. NAME OF ADULT DAY CARE PROGRAM DIRECTOR			
8. HAS THE PROGRAM, PROVIDER DIRECTOR OR ANY CORPORATE OFFICERS, DIRECTORS OR HOLDERS OF FIVE PERCENT (5%) OR MORE STOCK OR OWNERSHIP EVER BEEN CONVICTED OF A MISDEAMOR RELATING TO THE OPERATION OF AN ADULT DAY CARE PROGRAM, LONG-TERM CARE FACILITY OR OF ANY FELONY? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, list the person's name and type of conviction: _____			
9. Fire Safety and Facility Physical Requirements (for all initial licensure applications only):			
For Free Standing Adult Day Care Programs submit a diagram of the building that houses the adult day care program. This diagram shall be labeled to show exits; fire extinguishers; smoke detectors and room use, such as dining, crafts, quiet room, therapy or offices. This diagram shall give exact measurements of the area to be used for the adult day care program.			
For Associated Adult Day Care Programs submit a diagram of the designated space for the adult day care program. This diagram shall show the portion set aside for the adult day care program including office space; dining area; quiet area; craft area; general adult day care meeting area or therapy. This diagram shall give exact measurement of the area used for the adult day care program and also show the locations of exits or entrances for day care; fire extinguishers; and other fire safety features, such as pull stations and smoke detectors.			
10. IS AN ALZHEIMER'S SPECIAL CARE UNIT/PROGRAM A PART OF THIS CENTER? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, then it is required MO Form 580-2637 (2-07), Alzheimer's Special Care Services Disclosure Form, be submitted with this application.			

11. The fee must be submitted with this application. Enclose a check or money order ONLY payable to the Missouri Department of Health and Senior Services.

I hereby affirm that I, as an individual, or the operating corporation or partnership for which I sign, have adequate financial resources to properly construct, equip and operate the adult day care program referred to in this application, and hereby authorize the division to obtain information from third parties verifying this.

I further affirm that I have read, understand and agree to abide by the provisions of sections 660.400 through 660.420, RSMo (2000), and the Adult Day Care Program Licensure rules of the Division of Regulation and Licensure – specifically, 19 CSR 30-90.010 through 19 CSR 30.90.080.

I further affirm that I understand that I am eligible for a license only if the program and the provider are in compliance with the law and the regulations thereunder, and that a license may be revoked at any time that the facility, provider or operator fail to comply with such laws and rules.

I further affirm under the penalties of perjury, that all documents and information required by the division to be filed pursuant to this application are true and correct to the best of my knowledge and belief and that all required documents are either included with the application or are currently on file with the division.

MUST BE SIGNED IN THE PRESENCE OF NOTARY	APPLICANT'S SIGNATURE	DATE
	PRINT OR TYPE NAME	TELEPHONE NUMBER ()
NOTARY PUBLIC EMBOSSEUR OR BLACK INK RUBBER STAMP SEAL	STATE	COUNTY (OR CITY OF ST. LOUIS)
	SUBSCRIBED AND SWORN BEFORE ME, THIS	
	DAY OF	YEAR
	NOTARY PUBLIC SIGNATURE	MY COMMISSION EXPIRES
NOTARY PUBLIC NAME (TYPED OR PRINTED)		

MO 580-2738 (2-07)

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SECTION VIII
POLICY #801.00

LICENSURE INSPECTIONS FOR ADULT DAY CARE PROGRAMS

Policy approved by: _____ Date: _____

Administrator, Section for Long-Term Care Regulation

POLICY: Inspection Procedures in Adult Day Care Centers

The Missouri Division of Regulation and Licensure (DRL) Section for Long-Term Care Regulation (SLCR) is required by Section 660.407, RSMo, to conduct at least two inspections per year of Adult Day Care (ADC) programs, at least one of which shall be unannounced to the operator or provider. SLCR staff shall document the inspection process using the Adult Day Care Inspector Notes Worksheets. At the completion of the process, SLCR staff shall also prepare, review and submit the completed inspection packet to the Central Office Licensure and Certification Unit.

19 CSR 30-90.010 DEFINITIONS

Program director means the individual person responsible for the on-site general administration of the adult day care program.

PROCEDURE

1. Off-Site Preparation

A. The Off-Site Preparation shall include a review of the files for the following:

- Copy of the last inspection report.
- Any complaints to be investigated. (Refer to Complaint Policy #803.00).
- Copy of the floor plan, as applicable.
- Information showing whether or not the program site is located within an organized municipality with local fire codes.
- Computer generated map and/or directions to the program site.
- Names of participants included for review at last inspection (might be listed on the inspection report).
- Information that the program is either freestanding or associated with a long-term care facility.

B. SLCR regional staff shall assemble the following forms, documents, and equipment:

- ADC Inspection Report (Form MO-580-2655 (2/07) (See Attachment A).
- Inspection Report Continuation (Form MO-580-2656 (2/07) (See Attachment B)
- ADC Inspection Checklist (Form MO-580-2657 (2/07) (See Attachment C).
- ADC Inspector Notes Worksheets (See Attachment D).

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- A copy of the current employee disqualification list.
- Appropriately calibrated thermometer(s) and other equipment, as applicable.
- Copy of the adult day care state regulations.

2. Entrance Conference

- A.** Upon arrival at the program site, regional office staff shall ensure that he/she is wearing a Department of Health and Senior Services (DHSS) identification badge. The badge shall be worn throughout the inspection process.
- B.** Upon arrival, regional staff shall introduce him/herself to the program director/designee, and request the number of participants currently at the site, the number of participants enrolled in the program, and the names of staff /volunteers currently on duty. The entrance conference shall include the following:
 - A brief explanation of the purpose of the inspection and brief description of the procedure and expected time frames;
 - A brief summary of the areas included in the inspection, i.e. tour, participant care, activities and rights reviews, including record review; inspection of kitchen area and food service, as applicable; environment, fire safety and general sanitation reviews.
- C.** Regional office staff shall provide the program director/designee the inspection check list (See Attachment C) and ask him/her to assemble the listed information for SLCR review as follows:
 - Personnel records for both paid and volunteer staff, as applicable, including employee disqualification list and criminal background checks, documentation that staff are free of communicable disease, and current certifications in first aid and CPR;
 - Names and social security numbers of all program employees and volunteers who may have contact with participants;
 - A list of names of all volunteers utilized by the program who have recurring contact with participants and little opportunity for supervision (e.g. a van driver, manicurist, therapy assistant);
 - Copies of contacts with agencies that provide outside services such as physical and occupational therapy (for the purpose of EDL/CBC review this would include agencies providing staff who have direct contact with participants);
 - Menus of meals planned for the current week and a record of meals actually served in the past four weeks;
 - Schedule of planned daily, group activities and records of activities actually conducted during at least the last four weeks;
 - Daily attendance log for participants;

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- Current program site inspection reports from the local health authority including catered food services and local fire department (as applicable); and
- A copy of the written emergency disaster plan for assuring safety of participants, staff and volunteers in case of fire or other disaster, including the written planned schedule for periodic checks for fire extinguishers and for smoke detector batteries, as applicable, and a copy of written plan for fire/ disaster drills and any available documentation.

In addition, regional office staff shall request the following information be assembled for review if the information will not be available within individual participant records:

- Copy of information given to participants/families on admission to the program, including information regarding discontinuing services and resolving grievances;
- A list of participants' date of entry into the program, the days of the week that each participant typically uses the services of the program site and the payment source; and
- Emergency medical plan

D. Regional office staff shall inform the program director/designee that following a brief tour, SLCR staff will select specific participant records for review.

3. Program Site Tour

- A.** Regional office staff shall begin touring the program site as soon as possible after the entrance conference. The tour should be appropriate to the size of the site.
- B.** Regional office staff should greet as many participants as appropriate.
- C.** Regional office staff shall tour all participant-use areas of the program site and note participants with special/high care needs for possible inclusion in the review sample.
- D.** At the conclusion of the tour, regional office staff shall select a participant sample that includes, if available, a newly admitted (within the last four weeks, if possible, or since the last inspection) participant. The sample should also be representative of the number of participants enrolled in the program and any identified concerns. The sample size shall be:
 - Twenty five per cent (25%) of the participant enrollment averaged to the nearest whole number, **modified as follows:**
 - If the average is less than three, a minimum of three (3) participants shall be selected, **if three are available; or**
 - If the average is greater than eight, a maximum of eight (8) participants shall be selected; **or**

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- A sample appropriate to investigate a specific focused area.

4. Program Site Inspection

Regional office staff shall document on the ADC Inspector Notes Worksheets the observations, interviews and record review which include the date, time and place and persons involved in the observations, interviews and notes taken from the record review. These notes become part of the official inspection packet. The inspection shall include the following areas:

A. Physical Environment and General Sanitation

Regional office staff shall conduct a review of the physical plant to ensure a safe, functional and sanitary environment for participants. During the tour and throughout the inspection, regional office staff will make observations of the physical environment to determine if the program site complies with the physical plant requirements in **19 CSR 30-90.070**. Regional office staff shall follow up on any observations of potential violations with interviews and review of pertinent records.

B. Fire Safety

In order to ensure compliance with fire safety regulations in **19 CSR 30-90.070**, regional office staff shall inspect the following fire safety equipment/issues:

- Fire alarm systems, as applicable;
- Sprinkler systems, as applicable;
- Smoke detectors;
- Fire extinguishers;
- Exit requirements;
- Emergency lighting, as applicable;
- Range hoods, as applicable;
- Documentation of the local fire authority's most recent review; and
- Other requirements, as applicable.

Regional office staff shall interview program staff regarding safety equipment and ask staff to describe how it works and what he/she would do in an emergency situation. The fire safety portion of the inspection shall include review of fire drill records and emergency procedures and interviews of staff/volunteers to assess their familiarity with procedures and equipment, as well as their training in response to emergencies. Documentation of required inspections (i.e. smoke detectors and fire extinguishers checked monthly) shall be reviewed. Regional office staff shall also review the written plan for assuring the safety of participants, staff and volunteers, developed by the program staff in consultation with state

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or local fire authorities, to ensure the plan complies with the standards set forth in **19 CSR 30-90.070 (2) (D)**.

C. Participant Care Review

Regional office staff shall review participant records and care in order to determine if the program site is meeting the participant care standards as set forth in **19 CSR 30-90.050**. Specifically, regional office staff must determine if the program is meeting the needs of its participants. Regional office staff shall observe and talk with participants and interview staff. Regional office staff shall review each sampled participant's record to ensure it includes at least the following:

- Written plan which assures transportation to a hospital or other type of facility providing emergency care;
- A written, signed agreement granting permission to transport the participant for emergency care to a designated facility;
- Emergency telephone contact numbers;
- Written medical assessment and physician's orders written prior to first day of program participation and signed by the physician within five working days of the first day of participation;
- Written plan of care developed within five contact days following the entry of the participant into the adult day care program. The plan shall be based on the functional, social, medical and psychological needs of the participant. The plan shall identify the regularly scheduled days for attendance, including arrival and departure time. The plan shall be reviewed at least every six months and modified as necessary;
- Monthly documentation regarding the participant's functional and psychosocial status;
- Documentation regarding any accident, injury or illness and emergency procedures taken, as applicable; and
- Regional office staff shall review sampled participants' care plans to determine if the program is providing for the participants' needs in accordance with the plan of care.

D. Medication Handling and Storage

- Regional office staff shall determine if there is a safe and effective system for handling and storing participants' medications. Participant care review shall include determining whether the sampled participant is responsible for handling his or her own medications or if the adult day care provider is responsible for storing and administering the participant's medications.

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- Regional office staff shall review each sampled participant's medication orders and determine if the participant has medication ordered during the time he or she uses the services of the program.
- Regional office staff shall review, as applicable, for appropriate medication administration documentation and talk with the resident, as appropriate, and program staff to review the participant's medication needs. A licensed nurse is required to dispense medications and receive physician's phone orders. If the program does not employ a full time nurse, SLCR staff must determine if a nurse is available at all times and on site when required.
- The medication review shall include if the medication storage is safe and secure, to ensure the participant's physician medication orders are followed, a review of the written record of medications administered, and an observation of the medication administration, when possible.

E. Kitchen Sanitation and Dietary

Regional office staff shall determine whether or not program staff prepares meals on the premises. Regional office staff shall review the kitchen and food storage and preparation area, as applicable, and determine if staff are meeting required sanitation requirements. If meals are prepared off-site, regional office staff shall obtain information showing where food is prepared and catered and document that information. Regional office staff shall also determine if program staff are following physician's dietary orders for sampled participants and assuring the availability of meals and supplemental snacks in accordance with individual care plans. Regional office staff shall document such information on inspection notes worksheets.

F. Record Keeping

Regional office staff shall review personnel records or other records and talk with staff regarding training and certification as applicable to determine if training and certification requirements are met in regards to participant care and emergency response.

G. Participants Rights

Regional office staff shall verify that the program is protecting the rights of its participants as set forth in **19 CSR 30-90.050 (9) – (11)**.

- Regional office staff shall speak with selected participants in order to determine if he/she perceives any problems with participants' rights or treatment by staff during the hours he/she uses the services of the program.
- Regional office staff shall observe the interaction between staff and participants.
- Regional office staff shall interview program staff regarding his/her knowledge of participants' rights.

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- Regional office staff shall review information given to participants/families on admission to the program including criteria for discontinuing services and resolving grievances.

5. Decision Making

- Regional office staff shall review inspection findings to determine any regulatory violations. Regional office staff shall maintain an ongoing dialog with program site staff regarding findings.
- As needed, Regional office staff shall consult with the Regional Manager or his/ her designee, who will contact the Engineering Consultation Unit Manager or designee, if necessary, regarding regulatory violations.
- Regional office staff shall prepare any participant and/or staff rosters, as applicable for the Exit Conference.

6. Exit Conference

Regional office staff shall notify the ADC program director as far in advance as practicable of the expected time of the Exit Conference and keep the program director/ designee informed of any schedule changes. The following items, as applicable shall be discussed during the exit conference:

A. If deficiencies are cited: Regional office staff shall restate the purpose of the inspection visit and the date of the process, and

- State the regulatory grouping of the noncompliance and reason for the citation.
- Inform the program director/designee that he/she will receive a letter and a Statement of Deficiencies from the regional office within ten (10) working days of the Exit Conference. (See Compliance Policy #804.00)
- Explain that the letter will state the outcome of the inspection and request the director submit a plan of correction including time frames of that action.
- If the program director disagrees with any item voiced during the exit conference, this should be discussed immediately for clarification. If he/she still disagrees with inspection findings, regional office staff shall inform the program director that concerns may be discussed with the regional office manager/designee.

B. If no deficiencies will be recommended: Regional office staff shall restate the purpose of the inspection/date and inform the program director that regional office staff will not be citing deficiencies. Regional office staff will also inform the program director/ designee that within ten (10) days of the Exit Conference, regional office staff will notify the

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LICENSURE INSPECTIONS FOR ADULT DAY CARE PROGRAMS

program director/ designee by letter that no deficiencies were cited as a result of the inspection.

- C.** Regional office staff will complete and sign the Inspection Report Form and request that the program director/designee also sign the Inspection Report Form. Regional office staff will leave a copy of the ADC Inspection Report Form with the program director/designee.
- D.** If deficiencies are cited, regional office staff shall document deficiencies on the DHSS forms in the ASPEN database.
- E.** An event ID will be created in the ASPEN database for each inspection regardless whether or not violations are cited.

7. Notification of Inspection Results

SLCR regional staff or Central Office staff, as applicable, will ensure that the completed and signed ADC Inspection Report Forms, ADC Inspector Notes Worksheets and other applicable forms are forwarded to the Licensure and Certification Unit in the inspection packet within thirty (30) days of the completion of the process (See Policy #804.00).

8. Revisits

A post -inspection revisit shall be completed to verify that deficiencies cited during a prior inspection or complaint investigation are corrected. Regional office staff will input the revisit findings into the appropriate fields in the ASPEN database.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF REGULATION AND LICENSURE
SECTION FOR LONG TERM CARE REGULATION
INSPECTION REPORT

DATE	
TIME IN	TIME OUT
County	

NAME OF ADC PROGRAM			
ADDRESS			
DIRECTORS NAME	DESIGNATED ASSISTANT		
TYPE OF FACILITY <input type="checkbox"/> FREESTANDING <input type="checkbox"/> ASSOCIATED	HOURSE OF OPERATION	DAYS OF OPERATION	
TYPE OF PROGRAM <input type="checkbox"/> SOCIAL <input type="checkbox"/> MEDICAL <input type="checkbox"/> OTHER _____	MEDICAID STATUS <input type="checkbox"/> APPROVED <input type="checkbox"/> APPROVAL PENDING <input type="checkbox"/> NO APPROVAL		
MAXIMUM NUMBER OF PARTICIPANTS	TOTAL PARTICIPANTS ENROLLED	PARTICIPANTS PRESENT	
COMPLIANCE WITH LAWS AND REGULATIONS <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> OTHER	COMPLIANCE AT REVISIT <input type="checkbox"/> YES <input type="checkbox"/> NO		
DEFICIENCIES			
STAFFING (19 CSR 30-90.040)			
PROGRAM POLICIES & PARTICIPANT CARE REQUIREMENTS & RIGHTS (19 CSR 30-90.050)			
RECORDKEEPING REQUIREMENTS (19 CSR 30-90.060)			
FIRE SAFETY CENTER AND BUILDING PHYSICAL REQUIREMENTS (19 CSR 30-90.070)			
EXIT INTERVIEW (PERSONS PRESENT) 1. 2. 3.			
COMMENTS			
SIGNATURE OF DIRECTOR/DESIGNEE	DATE		
SIGNATURE OF ADC COORDINATOR	DATE		



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF REGULATION AND LICENSURE
SECTION FOR LONG TERM CARE REGULATION
INSPECTION CHECKLIST

NAME OF ADC PROGRAM	DATE		
PLEASE ASSEMBLE THE FOLLOWING FORMS FOR REVIEW		NEEDED	REC'D
1. Personnel records for both paid and volunteer staff for review, as applicable , including information regarding Employee Disqualification List and Criminal Background Checks (EDL/CBC), documentation that staff are free of communicable disease, and current certifications in first aid and CPR.			
2. Names and social security numbers of all Program employees who may have contact with residents.			
3. A list of the names of all volunteers utilized by the Program who have recurring contact with participants and little opportunity for supervision (i.e. a van driver, manicurist, therapy assistant).			
4. Copies of any contracts with agencies that provide outside services. (For the purpose of the EDL/CBC review, this would include agencies providing staff who have direct contact with participants.)			
5. Menus of meals planned for the current week and a record of meals actually served in the past four weeks.			
6. Schedule of planned daily, group activities and records of activities actually conducted.			
7. Daily attendance log for participants.			
8. Current facility inspection reports from the local health authority, local fire department (as applicable) including catered services.			
9. A copy of the written plan for assuring safety of participants, staff and volunteers in case of fire or other disaster, including the written planned schedule for periodic checks for fire extinguishers and for smoke detector batteries, as applicable, and a copy of written plan for fire/disaster drills and any available documentation.			
THE FOLLOWING INFORMATION WILL ALSO BE NEEDED IF THIS INFORMATION IS NOT AVAILABLE WITH-IN THE PARTICIPANT RECORDS.	NEEDED	REC'D	
1. Copy of information given to participants/families on admission to the Program, including information regarding discontinuing services and resolving grievances.			
2. A list of participants' date of entry into the program, the days of the week that each participant typically uses the services of the Program site and the payment source.			
3. Emergency Medical Plan			
NOTES			

SECTION FOR LONG-TERM CARE REGULATION

Effective: 12/01/02

Revised: 6/15/07

SECTION VIII
POLICY #802.00

SECOND INSPECTIONS FOR ADULT DAY CARE PROGRAMS

Policy approved by: _____ Date: _____
Administrator, Section for Long-Term Care Regulation

POLICY

The Missouri Division of Regulation and Licensure (DRL) Section for Long-Term Regulation (SLCR) is required by Section 660.407, RSMo, to conduct at least two inspections per year of Adult Day Care (ADC) programs, at least one of which must be unannounced to the operator or provider. One of these inspections must be a full inspection. The other inspection may be a full inspection or an abbreviated inspection conducted as an independently scheduled procedure or in conjunction with a complaint investigation or a revisit to determine if previously cited deficiencies are corrected. SLCR staff shall document the inspection process using the Adult Day Care Inspector Notes Worksheets. At the completion of the process, SLCR staff shall also prepare, review and submit the completed inspection packet to the Central Office Licensure and Certification Unit.

PROCEDURE

SLCR regional office staff shall conduct at least one Second inspection of licensed ADC programs each state fiscal year using one of the following methods:

- A full inspection following the procedure set forth in Policy #801.00.
- An independently scheduled abbreviated inspection following the procedures set forth below.
- An abbreviated inspection, following the procedures set forth in below, conducted in conjunction with a complaint investigation and/ or revisit to determine if previously cited deficiencies are corrected.

When conducting an abbreviated inspection in an ADC program, SLCR regional office staff shall utilize the following procedure:

1. SLCR regional office staff shall conduct off-site preparation as detailed in item one (1) in Policy #801.00.
2. Entrance Conference
 - A. Upon arrival at the program site, SLCR regional office staff shall ensure that he/she is wearing a Department of Health and Senior Services (DHSS) identification badge. The badge shall be worn throughout the inspection process.

SECTION FOR LONG-TERM CARE REGULATION

Effective: 12/01/02

Revised: 6/15/07

SECTION VIII
POLICY #802.00

SECOND INSPECTIONS FOR ADULT DAY CARE PROGRAMS

- B. Upon arrival, SLCR regional staff shall introduce him/herself to the program director/designee, and request the number of participants currently at the site, the number of participants enrolled in the program, and the names of staff /volunteers currently on duty. The entrance conference shall include a brief explanation of the purpose of the inspection and brief description of the procedure and expected time frames.
3. SLCR regional office staff shall conduct a tour, interview participants and staff, observe the program site and focus on the following criteria:
 - Participants appear clean, dry and free of offensive body odor;
 - Participants appear to be appropriately nourished and hydrated;
 - Clients do not appear fearful of staff or other clients;
 - Staff/Participant interactions appear appropriate and timely;
 - Staffing appears sufficient to meet the needs of the participants;
 - Medications are stored safely;
 - Participants appear to be treated with consideration, respect and dignity;
 - Participants appear to be involved with scheduled activities, if they choose to participate;
 - Temperature in the building is comfortable and participants do not voice complaints;
 - Toxic materials are not readily accessible;
 - Appropriate water temperatures are maintained; and
 - There are no apparent fire safety hazards.
4. SLCR regional office staff shall document the findings of the second inspection on the Inspection Notes Worksheet (Form MO-580-2857 (3/07)). See Attachment A.
5. If SLCR regional office staff are revisiting on previously cited deficiencies or investigating a complaint, observations and interviews (if necessary) should also focus on those areas required to determine the correction of the deficiencies or the validity of the complaint.
6. It will not be necessary to choose a resident sample unless it is required to determine the validity of a complaint, the correction of previously cited deficiencies or as follow up for potential violations.
7. SLCR regional office staff shall inspect the program site for compliance in the areas of Physical Requirement and General Sanitation. During the tour and

SECTION FOR LONG-TERM CARE REGULATION

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SECOND INSPECTIONS FOR ADULT DAY CARE PROGRAMS

throughout the inspection, regional office staff will make observations of the physical environment, including the kitchen and dining areas, to determine if the program site is a safe, functional and sanitary environment for participants.

SLCR regional office staff shall follow up on any observations of potential violations with interviews and review of pertinent records.

8. SLCR regional office staff shall inspect the program site for compliance with Fire Safety Requirements. The fire safety portion of the inspection shall include the following:
 - Review of fire drill records and emergency procedures;
 - Documentation of required inspections (i.e. smoke detectors and fire extinguishers checked monthly);
 - Review the written plan for assuring the safety of participants, staff and volunteers, developed by the program staff in consultation with state or local fire authorities, to ensure the plan complies with the standards set forth in 19 CSR 30- 90.070 (2) (D); and
 - Conduct additional reviews, observations and interviews as follow up for any potential violations.
9. The following tasks are not necessary unless additional information is needed to determine the validity of a complaint, the correction of any previously cited deficiencies or as follow up for potential violations:
 - Review of participant and employee records;
 - Medication pass;
 - Meal observation; and
 - Observation of food storage, preparation and service.
10. SLCR regional office staff shall follow the procedures set forth in Policy #801.00 for conducting decision-making and the exit conference.
11. SLTC regional staff shall write “Second Inspection” on the Adult Day Care Inspection Report Form (Form MO-580-2857 (3/07)) (Attachment B) and send the signed and completed Adult Day Care Inspection Report Form with the Adult Day Care Inspection Notes Worksheets (Attachment A) and any other applicable forms to the SLCR Licensure and Certification Unit within ten days completion of the process (See Policy 804.00).

ADMINISTRATIVE POLICY AND PROCEDURE MANUAL

SECTION FOR LONG-TERM CARE REGULATION

Effective: 12/01/02

Revised: 2/23/07

SECTION VIII

POLICY #803.00

ADULT DAY CARE PROGRAM COMPLAINTS

Policy approved by: _____ Date: _____

Administrator, Section for Long -Term Care Regulation

POLICY: Investigation of Complaints in Adult Day Care Centers

All complaints related to Adult Day Care (ADC) programs shall be forwarded to the regional office manager or his/her designee for prioritization and assignment. Generally, Section for Long-Term Care Regulation (SLCR) staff shall investigate the complaints at the next scheduled inspection. However, the regional office manager or his/her designee may require more immediate time frames based on the seriousness of the allegations.

PROCEDURE

1. The Central Registry Unit (CRU) shall forward all complaints related to adult day care (ADC) programs to the regional office manager or his/ her designee on the same day the report is received.
2. The regional office manager or his/her designee shall review the complaint within one working day of receipt, determine the priority for investigation and assign the complaint to the appropriate regional office staff.
3. Complaints will be assigned priorities consistent with current SLCR policy for complaints in long-term care facilities. Regional office staff shall start and complete the investigation within the timelines set forth in the *Timelines For The Complaint Investigation Process* contained in the SLCR Complaint Manual (See Attachment A).
4. Complaints with allegations regarding the welfare of the participants while away from the program site shall be referred to the Division of Senior and Disability Services.
5. Regional office staff shall document his/her investigation on the Adult Day Care Inspector Notes Worksheets. Any deficiencies cited shall be documented on Adult Day Care Inspection Report Form (Form MO-580-2655 (2/07)).
6. Regional office staff shall forward the completed complaint packet to Central Office within thirty (30) days of the final action of the complaint investigation process.

TIMELINES FOR THE COMPLAINT INVESTIGATION PROCESS

Effective 7/1/00

A. Initial Contact/Priority Coding:

All complaints with known reports (for whom we have contact information i.e. telephone numbers, etc.) are to be initiated by contacting the reporter within 24 hours in order for the priority code to be assigned within 24 hours. If the reporter is not known, left no contact information or cannot be contacted after attempts were made, the region assigns the priority code within 24 hours to the best of their ability based on the information obtained by CRU and any other information available to the region.

B. Start of Investigation:

The investigation starts with the first investigatory contact that is NOT the reporter. This can consist of an on-site visit, a call to the facility, a call to a witness, a call to the Ombudsman OR whoever/whatever is able to provide information relevant to beginning the investigation. It should be noted that the purpose of conducting an on-site visit for Priority A and B complaint reports is to insure the safety of the residents in addition to starting the investigation. (Guidelines regarding when on-site visits are required will be developed to be contained within the policy addressing investigations.)

Priority A: On-site (if required) or the investigation started within 24 hours

Priority B: On-site (if required) or the investigation started within 10 working days

Priority C: On-site (if required) or the investigation started within 30 calendar days

Priority D: On-site (if required) or the investigation started within 60 calendar days

C. Completion of Investigation:

The investigation will be considered completed when the team has gathered sufficient evidence to determine the findings of the investigation, has made a determination of findings and has conveyed their decision to the facility. The final part of this process occurs at the time of the exit conference for the complaint, therefore, we will consider the completion date **of the investigation** to be the date of the exit conference.

Priority A: exit within 30 calendar days of receipt of complaint report

Priority B: exit within 45 calendar days of receipt of complaint report

Priority C: exit within 90 calendar days of receipt of complaint report

Priority D: exit within 90 calendar days of receipt of complaint report

D. Letters/Data Entry Timelines:

Once the finding is determined and the exit conference held, the following must be completed within 14 calendar days:

- data entry into the interim data collection system and/or ALPINE
- contact made with reporter regarding the results of the investigation

NOTE: A letter regarding the results of the investigation will be sent to all known reporters who provide an address. This letter could be a brief follow-up to telephone or face-to-face contact with reporter regarding the complaint investigation findings.

E. Documentation Timelines:

For complaint investigations which resulted in no SOD the completed hard copy packet must be mailed out of the regional office to central files within 30 calendar days after the date of exit.

For complaint investigations which resulted in an SOD or were investigated in conjunction with a complaint or survey which resulted in an SOD, the completed hard copy packet must be mailed out of the regional office to central files within 30 calendar days of the date that correction was determined and all actions (i.e. IDRs) completed.

ADMINISTRATIVE POLICY AND PROCEDURE MANUAL

SECTION FOR LONG-TERM CARE REGULATION

Effective: 12/01/02

Revised: 2/23/07

SECTION VIII

POLICY # 804.00

ASSURING COMPLIANCE IN ADULT DAY CARE PROGRAMS

Policy approved by: _____ Date: _____
Administrator, Section for Long-Term Care Regulation

POLICY: Procedures to Ensure Correction of Deficiencies cited during Licensure and Complaint Investigations

The Missouri Division of Regulation and Licensure (DRL), Section for Long-Term Care Regulation (SLCR) is required by Section 660.407, RSMo, to make at least two inspections each state fiscal year of Adult Day Care (ADC) programs. At least one of the inspections shall be unannounced to the operator or provider. The Section may conduct additional inspections, announced or unannounced, as it deems necessary to carry out the provisions of sections 199.025, and 660.403 to 660.420 RSMo. When regulatory violations are cited at an inspection or complaint investigation, SLCR shall follow the procedure set forth below.

PROCEDURE

1. SLCR regional staff shall document the evidence on the Adult Day Care Inspector Notes Worksheet and the deficiencies on Adult Day Care Inspection Report (Form MO-580-2655 (2/07)).
2. Within ten working days of the exit conference, the regional office manager or his/her designee shall send a letter informing the ADC program director/designee of the outcome of the inspection and request a written plan of correction be submitted for any deficiencies cited.
3. If during an inspection or complaint investigation, regional office staff determines violations are present which present a threat of imminent danger to the health, safety or welfare of program participants, regional office staff shall notify the regional office manager or his/her designee and remain at the program site until corrective action is implemented and necessary authorities are notified (as applicable). Regional office staff shall document on the ADC Inspection Report the immediate steps taken to safeguard the participants. Regional office staff will conduct a reinspection within twenty (20) days of the exit conference in order to determine if the deficiencies are corrected.
4. If at the time of the inspection or complaint investigation, regional office staff determines violations exist which have a direct or immediate impact to the health, safety or welfare of a participant but which do not create imminent danger, regional office staff will conduct a reinspection within sixty (60) days of the exit conference in order to determine if the deficiencies are corrected.

ADMINISTRATIVE POLICY AND PROCEDURE MANUAL
SECTION FOR LONG-TERM CARE REGULATION

Effective: 12/01/02

Revised: 2/23/07

SECTION VIII
POLICY # 804.00

ASSURING COMPLIANCE
IN ADULT DAY CARE PROGRAMS

- 5. For all other deficiencies, regional office staff shall typically verify correction at the next inspection or complaint investigation.
- 6. If regional office staff determines that the ADC program has failed to correct previously cited violations, the regional office manager or his/ her designee shall contact the department's Engineering Consultation Unit Manager or designee to determine the appropriate remedy.



Section for Long-Term Care Regulation Policy and Procedure Manual

Policy # 805.00	ADULT DAY CARE INFORMAL DISPUTE RESOLUTION CONFERENCE
Effective: 11/18/14	

POLICY

If an Adult Day Care (ADC) program wishes to dispute a proposed deficiency prior to the finalization of the Statement of Deficiencies (SOD), the program director or designee may request an administrative conference with the appropriate Section for Long-Term Care Regulation (SLCR) Regional Manager. When a program chooses to dispute a deficiency after the SOD has been finalized and mailed, the program director or designee must make a formal written request to the Regional Manager and the SLCR Regulation and Compliance Unit for an Informal Dispute Resolution (IDR) conference. SLCR staff shall verbally inform program administrative staff of these options at the time of the process exit conference. Additionally, the letter transmitting the SOD will contain instructions on how to request an IDR.

PROCEDURE

1. When SLCR staff recommends deficiencies as a result of a state inspection and/or complaint investigation, **SLCR staff shall verbally inform** the ADC program director or designee at the time of the exit conference of the following procedure for appealing or disputing any recommended deficiencies:
 - A. If the ADC program director or designee chooses to dispute recommended deficiencies **prior to the finalization of the SOD**, the director or designee may contact the SLCR Regional Manager to request a Regional Administrative Conference. The Regional Manager may resolve informally disputed deficiencies or language contained in the SOD **up to the time the SOD is finalized and mailed** to the program.
 - B. If the ADC program director or designee chooses to dispute cited deficiencies **after the SOD is finalized and mailed**, he/she shall have one opportunity to request a reconsideration of the cited deficiencies. An IDR may be held for any deficiency for which a program submits a written request.
 - C. The ADC program director or designee must submit the request for an IDR conference to the Regional Manager and the SLCR Regulation and Compliance Unit **in writing within ten (10) working days** of the receipt of the SOD. This is the same time frame the program has for submitting a plan of correction for cited deficiencies. The request for an IDR conference must be in written form, include a copy of the SOD being disputed, identify any specific deficiencies in question, and include an explanation of why the deficiencies are disputed.



Section for Long-Term Care Regulation Policy and Procedure Manual

2. **Within ten (10) working days** of receipt of an IDR conference request, the SLCR Regulation and Compliance Unit will hold the IDR conference unless otherwise requested by the ADC program. The program and SLCR Regional Office must send the SLCR Regulation and Compliance Unit all documentation to be considered at the IDR conference **at least five (5) working days** prior to the IDR conference.

The IDR conference will only be rescheduled one time for failure to produce documentation within the required time frame. The rescheduled IDR conference must be held **within ten (10) working days** of the originally scheduled IDR conference.

Program failure to attend the IDR conference at the scheduled date and time will result in rejection of the request for the opportunity to dispute the deficiencies unless it is determined by the Division Director or designee that the program's inability to attend was reasonable and unavoidable.

3. The type of IDR conference will be at the discretion of the ADC program, but will be limited to a:
 - Desk review of written information;
 - Telephonic conference; or
 - Face-to-face conference held at the office of the SLCR Regulation and Compliance Unit.
4. The ADC program will determine the program personnel present at the conference and one individual must be designated as responsible for making the program's presentation. The designated program representative must present facts which dispute the information upon which the deficiency was based. All evidence utilized to dispute any deficiencies cited must address what the program did or did not do in relation to the deficient practice as identified in the SOD. **Information which does not address the disputed deficiencies will not be considered at the IDR.**

The SLCR Regulation and Compliance chairperson or designee will convene a panel of three (3) Regulation and Compliance staff persons who were not involved in the inspection.

The SLCR inspection team may attend the IDR conference. At the conclusion of the IDR conference, the panel will review the information presented, identify and obtain any additional information required to make a final determination and formulate a recommendation.

5. The panel will make a recommendation to the Division of Regulation and Licensure Director through the Regulation and Compliance Unit Chief or designee as to whether the deficiencies should be upheld, modified or deleted. The Division Director or designee will review the recommendation of the panel, make the final determination, and notify the ADC program of the final determination **within ten (10) calendar days** of the IDR conference.

If it is determined that deficiencies will be removed or modified as a result of the IDR determination, an amended SOD will be issued to the ADC program. The program will have **ten (10) working days** to submit a plan of correction for the amended SOD to the SLCR Regional Manager.



Section for Long-Term Care Regulation Policy and Procedure Manual

APPROVED BY:

Section Administrator

Date

Checklist for ADC Inspections

Off-Site Preparation

- Review license for program capacity and expiration date
- Review compliance history, results of the last inspection, and any revisit information as applicable
- Review for outstanding complaints

Forms and Equipment

- Inspection Report Form (MO 580-2655)
- Inspection Report Continuation Form (MO 580-2656)
- Inspection Checklist (MO 580-2657)
- Copy of the current EDL list
- Thermometers and Flashlights
- Copy of the ADC regulations

Licensure Inspection

Request the Following:

- Personnel records for both paid and volunteers to include name, social security number, EDL/CBC checks, and a copy of licenses of appropriate staff (i.e. registered nurses)
- Contracts with any outside agencies providing services to participants (i.e. physical and/or occupational therapy)
- Menus of meals planned for the current week and meals actually served in the past four weeks.
- Any modified or calculated diets served to participants per physician orders
- Schedule of planned group activities and records of the conducted activities for the last four weeks.
- Daily attendance log
- Current program reports from local fire authorities and health departments as applicable
- Copy of the written emergency plan for fire emergencies and other disasters
- Emergency medical plan

Review the Following:

- Physical environment for cleanliness and sanitation
- Is all equipment and furniture clean and in good repair
- Fire alarms or smoke detectors are operating and monthly checks are completed and documented
- Fire extinguishers are accessible and checked monthly
- Exits are unobstructed and the program has at least two remote from one another
- Hot water temperatures do not exceed 120 degrees Fahrenheit
- Sprinkler systems, as applicable, have been tested within the last year and the sprinkler heads are not obstructed

- Kitchen and dietary areas are clean and sanitary and refrigeration units have appropriate thermometers

Participant Care Review

- Each participant has a written emergency medical plan agreed to and signed by the participant or the responsible party
- Emergency contact phone numbers for all participants
- Written medical assessment and physician orders written prior to admission into the program and signed within five days
- Written care plan developed by the fifth contact day
- Written monthly participant reviews to including an overview of care received, any accidents, injuries, or illness
- Medications are administered as ordered by the physician, by licensed staff, records of administration, and an self administration by participants
- Care plans are reviewed at least every six months or upon any changes in care needs and are modified as needed

Exit Conference

- Schedule the time for exit with the program director
- State the purpose of the exit conference
- Review the deficiencies with the program director including regulatory grouping numbers and give examples
- Explain regional office will send an SOD within 10 working days of the exit
- Explain time frames for correction
- Explain the POC shall be submitted to regional office within 10 work days upon receipt of the SOD
- Complete and leave copies of the Inspections Report forms and Inspection checklist



Missouri Department of Health and Senior Services
P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
RELAY MISSOURI for Hearing and Speech Impaired and Voice dial: 711

Randall W. Williams, MD, FACOG
Director



Michael L. Parson
Governor

ADC - ACCEPTABLE PLAN OF CORRECTION

Date

Recipient's Name

ADC Name

ADC Address

Dear Recipient:

This is to acknowledge receipt of your plan of correction on Date it was received and to advise you that the plan has been reviewed and is considered acceptable as submitted.

If at the time of the inspection or complaint investigation, violations existed which have a direct or immediate impact to the health, safety or welfare of a participant, but which did not create imminent danger, a re-inspection will be conducted within sixty (60) days of the original inspection completed on Date of Exit to determine whether the deficiencies have been corrected. For all other deficiencies, correction of the violations will be verified during the next on-site visit.

If you have any questions, please contact me at Address and/or Telephone Number.

Sincerely,

Program Manager's Name, Program Manager
Section for Long-Term Care Regulation

Program Manager's Initials/initials of person typing the letter

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Randall W. Williams, MD, FACOG
Director



Michael L. Parson
Governor

ADC-INSEPTION, NO DEFICIENCIES

Date

Recipient's Name
ADC Name
ADC Address

Dear Recipient:

This is to confirm the recent inspection of **ADC Name** completed on **Date of Exit**. This inspection was conducted for the purpose of determining compliance with the requirements for licensure as an Adult Day Care Center.

Based upon our findings during this visit, your program is in compliance with all licensure laws, rules and regulations.

Thank you for the time and courtesy extended by you and your staff during the inspection. If you have any questions, please feel free to contact **inspector's name** at **inspector's phone number**.

Sincerely,

Program Manager's Name, Program Manager
Section for Long-Term Care Regulation

Program Manager's Initials/ initials of the person typing the letter

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ADC – PLAN OF CORRECTION NOT RECEIVED

Date

Recipient's Name
ADC Name
ADC Address

Dear Recipient:

Name of ADC was inspected on Date of Exit by the Missouri Department of Health and Senior Services. The purpose of this inspection was to determine if regulations were being met as required for licensure of an Adult Day Care Center.

The inspections revealed some deficiencies that were discussed with Name of the on-site Director/designee during the exit conference. The statement of deficiency letter was mailed to the ADC Director/designee on date mailed.

This letter is to advise you that the plan of corrections for ADC Name have not been received. As stated in the original letter, you are required to submit your plan of correction to this office within ten (10) working days of the receipt for review and approval.

Please immediately forward your plan of correction to this office. If you have already forwarded your plan of correction to this office, or if the ADC Director/designee did not receive the original letter mailed on Date mailed, please contact Inspector's name and phone number.

Please mail the original statement of deficiencies with your signature and plan of correction to: Department of Health and Senior Services, Inspector's office address.

Sincerely,

Program Manager's Name, Program Manager
Section for Long-Term Care Regulation

Program Manager's Initials/ initials of the person typing the letter

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ADC – REJECTED PLAN OF CORRECTION

Date

Recipient's Name
ADC Name
ADC Address

Dear Recipient:

This is to acknowledge receipt of your plan of correction in this office on Date received and to advise you that the plan has been reviewed and it has been determined that the plan is not acceptable as submitted. It will be necessary for you to complete and forward an amended plan of correction in order that the inspection process may be completed.

The following represents deficiencies that require an amended plan of correction as well as the reason(s) the plan of correction has been rejected:

Type Text

Enclosed is your statement of deficiencies. Use the space provided to the right of each deficiency to type your plan of correction and the expected date of completion. A plan of correction must be entered for each item clearly identifying HOW, WHAT, WHEN, WHERE it was or will be corrected. The plan should also include provisions instituted to prevent reoccurrence.

As stated in your letter of Date of letter, your plan of correction must contain the following:

- What corrective action(s) will be accomplished for those participants found to have been affected by the deficient practice;
- How you will identify other participants having the potential to be affected by the same deficient practice;
- What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur;

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- How the facility plans to monitor its performance to make sure that solutions are sustained. The facility must develop a plan for ensuring that corrections achieved are sustained. This plan must be implemented, and the corrective action evaluated for its effectiveness, and
- Your plan of correction must include dates by which corrective action will be completed.
- **Your Plan of Correction MUST NOT INCLUDE THE NAME OF PARTICIPANTS. In addition your Plan of Correction should not include other participant specific information such as medical records.**

Sign, date, and return the statement of deficiencies with the plan of correction to this office **immediately**. Please make a copy of the completed forms for your records. Upon our receipt of your plan of correction, you will be notified in writing if it has been accepted or rejected.

If you have any questions, please contact me at **Address and/or Telephone Number**.

Sincerely,

Program Manager's Name, Program Manager
Section for Long-Term Care Regulation

Program Manager's Initials/ initials of the person typing the letter



Missouri Department of Health and Senior Services
P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010
RELAY MISSOURI for Hearing and Speech Impaired and Voice dial: 711

Randall W. Williams, MD, FACOG
Director



Michael L. Parson
Governor

ADC – REVISIT LETTER

Date

Recipient's Name
ADC Name
ADC Address

Dear Recipient:

This is to confirm the revisit of **ADC Name** on **Date of revisit**.

This revisit was to determine if deficiencies noted during the inspection completed on **Date of Exit** had been corrected.

At this time, all deficiencies noted on that inspection have been corrected. The results of this inspection will be forwarded to Central Office for appropriate action.

If you have any questions, please contact me at **Address and/or Telephone Number**.

Sincerely,

Program Manager's Name, Program Manager
Section for Long-Term Care Regulation

Program Manager's Initials/ initials of the person typing the letter

www.health.mo.gov

Healthy Missourians for life.

The Missouri Department of Health and Senior Services will be the leader in promoting, protecting and partnering for health.

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ADC – STATEMENT OF DEFICIENCIES LETTER

Date

Recipient's Name

ADC Name

ADC Address

Dear Recipient:

This is to confirm the recent inspection of **ADC Name** completed on **Date of Exit**. This inspection was conducted for the purpose of determining compliance with the requirements for licensure as an Adult Day Care Center.

The inspection revealed deficiencies that were discussed with you during this exit conference. These are listed on the enclosed statement of deficiencies with their corresponding regulation number and deficiency classification. Please use the space to the right of each deficiency to enter your plan of correction and the expected date of completion. A plan of correction must be entered for each item clearly identifying HOW, WHAT, WHEN, WHERE it was or will be corrected. The plan should also include provisions instituted to prevent reoccurrence.

Your plan of correction must contain the following:

- What corrective action(s) will be accomplished for those participants found to have been affected by the deficient practice;
- How you will identify other participants having the potential to be affected by the same deficient practice;
- What measures will be put into place or what systemic changes you will make to ensure that the deficient practice does not recur;
- How the facility plans to monitor its performance to make sure that solutions are sustained. The facility must develop a plan for ensuring that corrections achieved are sustained. This plan must be implemented, and the corrective action evaluated for its effectiveness; and
- Your plan of correction must include dates by which corrective action will be completed.
- **Your Plan of Correction MUST NOT INCLUDE THE NAME OF PARTICIPANTS. In addition your Plan of Correction should not include other participant specific information such as medical records.**

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Sign, date and return the statement of deficiencies with the plan of correction to this office within ten (10) working days of the receipt. Please make a copy of the completed forms for your records. The Section for Long-Term Care Regulation (SLCR) will notify you in writing if it has been accepted or rejected.

If at the time of the **inspection or complaint investigation**, violations existed which have a direct or immediate impact to the health, safety or welfare of a participant, but which did not create imminent danger, a re-inspection will be conducted within sixty (60) days of the original inspection completed on **Date of Exit** to determine whether the deficiencies have been corrected. For all other deficiencies, correction of the violations will be verified during the next on-site visit.

In accordance with Section 192.2270, RSMo, you have one (1) opportunity to question cited deficiencies through an informal dispute resolution process. To be given such an opportunity, you are required to send your written request (separate from the plan of correction), along with the specific deficiencies being disputed, and an explanation of why you are disputing those deficiencies to:

Manager's Name	Steven Vest
Manager's Title	MO Department of Health & Senior Services
Regional Office	SLCR Quality Review Unit
Address 1	3418 Knipp Dr., P.O. Box 570
Address 2	Jefferson City, MO 65102
City, MO Zip Code	Steven.Vest@health.mo.gov

Please include a copy of the statement of deficiencies being disputed with your correspondence to the SLCR Survey and Compliance Unit.

This request must be sent during the same ten (10) working days you have for submitting a plan of correction for the cited deficiencies. The informal dispute resolution may be conducted by telephone, in writing or in a face-to-face meeting. An incomplete informal dispute resolution process will not delay the effective date of any enforcement action.

You must keep copies of all inspection reports, statement of deficiencies and plans of correction available at your center for public inspection. These findings are also available in our office in accordance with the Public Disclosure Act.

Thank you and your staff for the time and courtesy extended to SLCR staff during the inspection. If you have any questions, please contact **(the name of the inspector at the inspector's phone number)**. Please mail the original statement of deficiencies with your signature and plan of correction to **(inspector's office address)**.

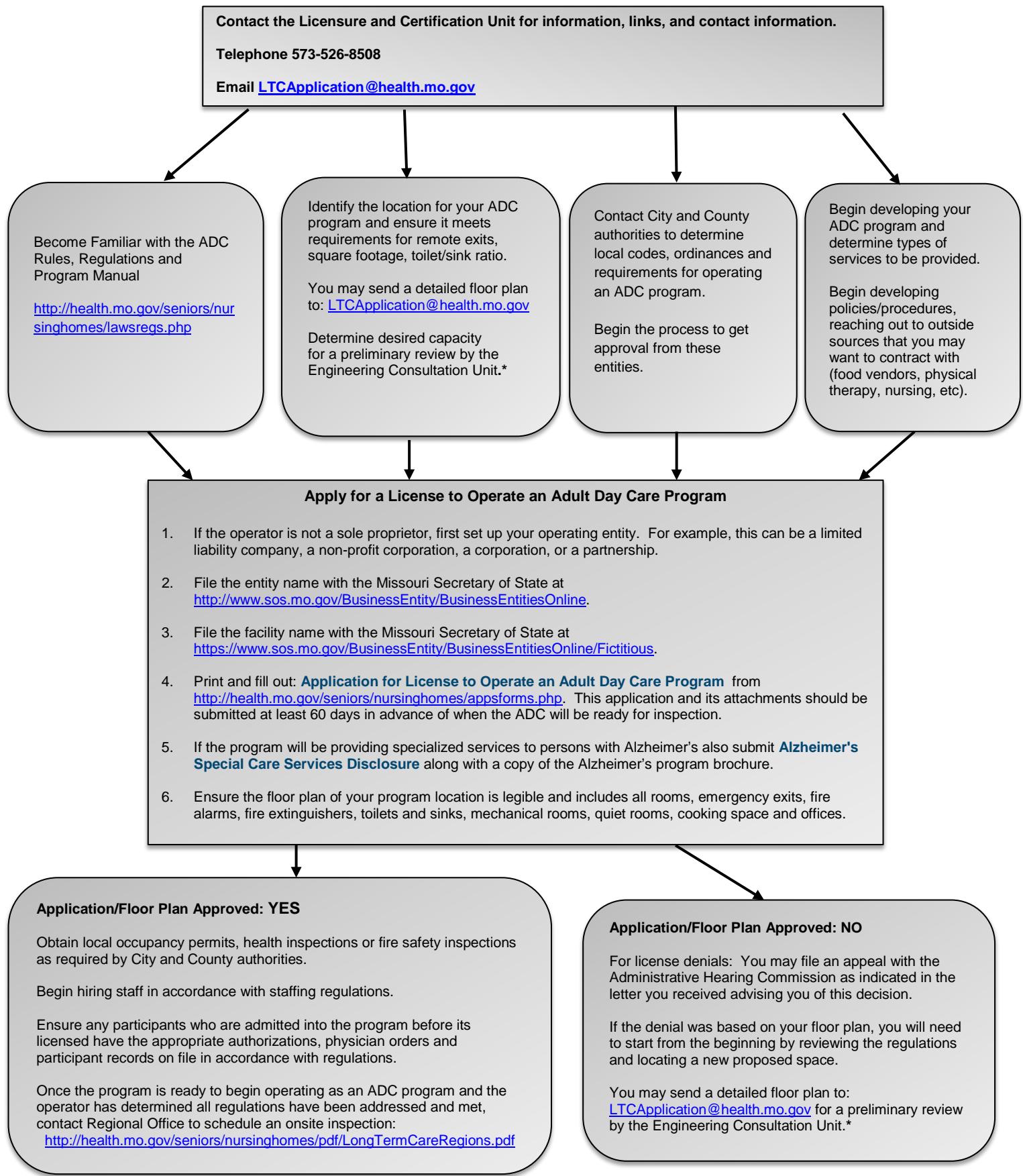
Sincerely,

Program Manager's Name, Program Manager
Section for Long-Term Care Regulation

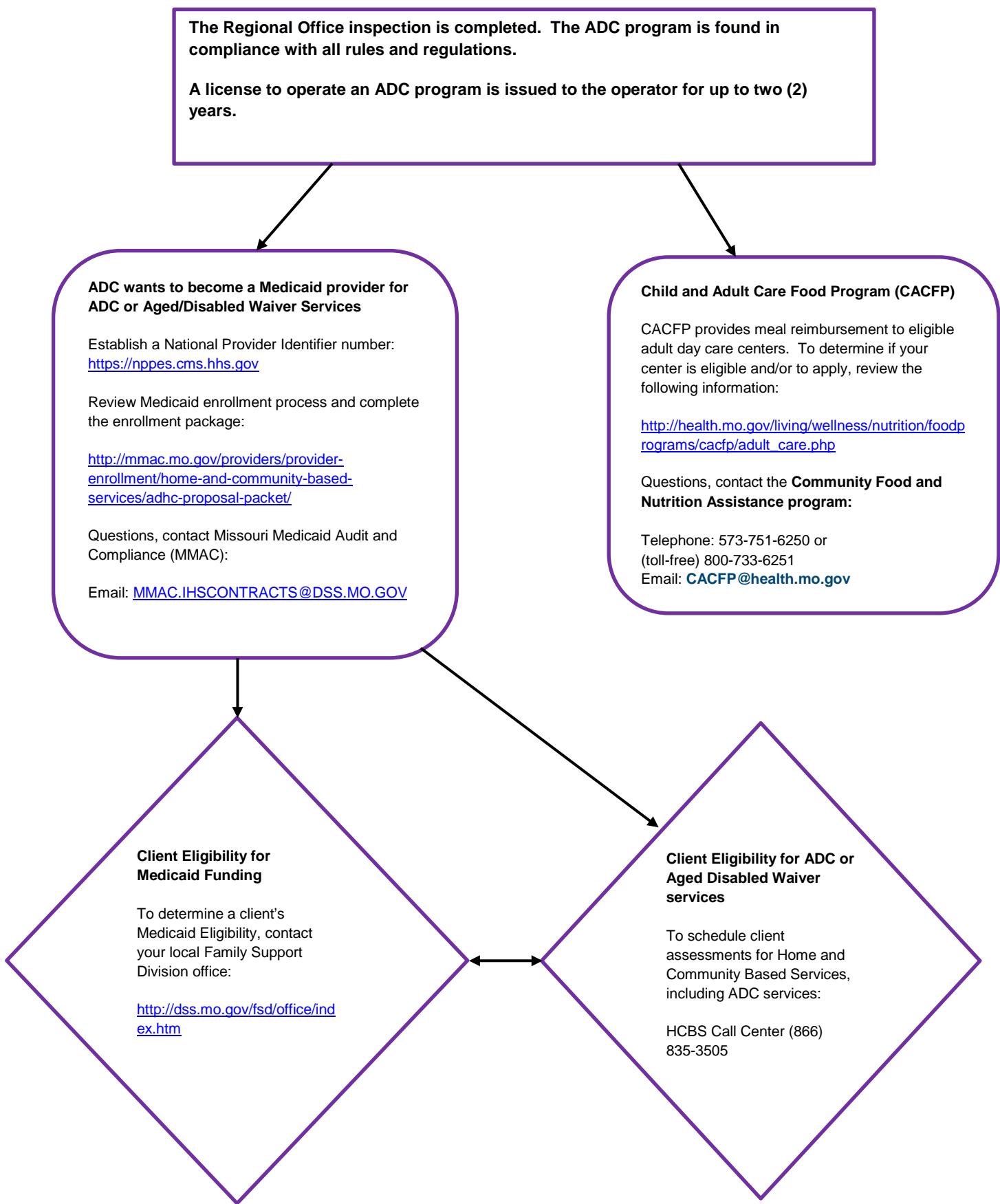
Program Manager's Initials/ initials of the person typing the letter

Enclosure

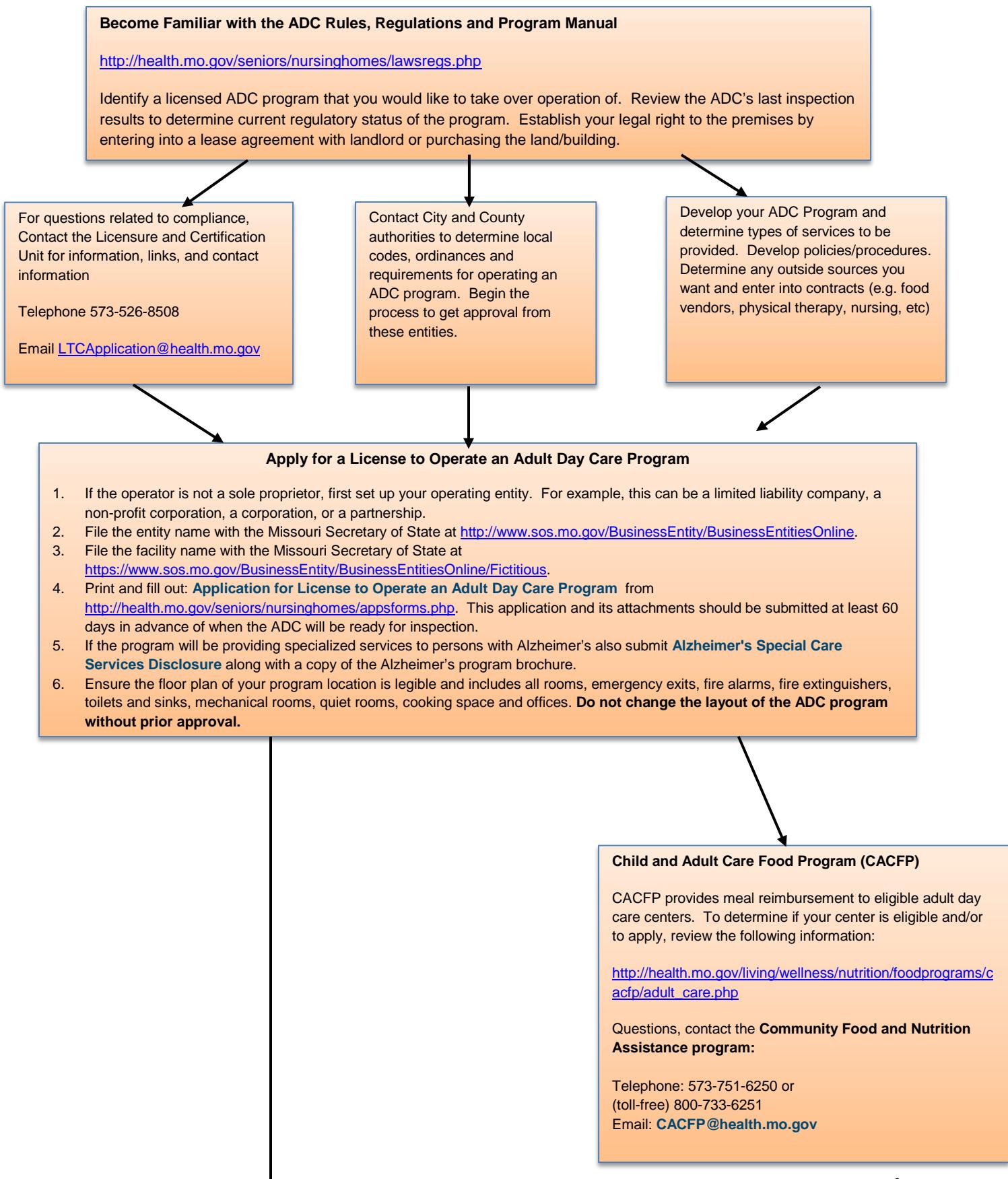
Opening An Adult Day Care Program - Flow Chart (pre-inspection)



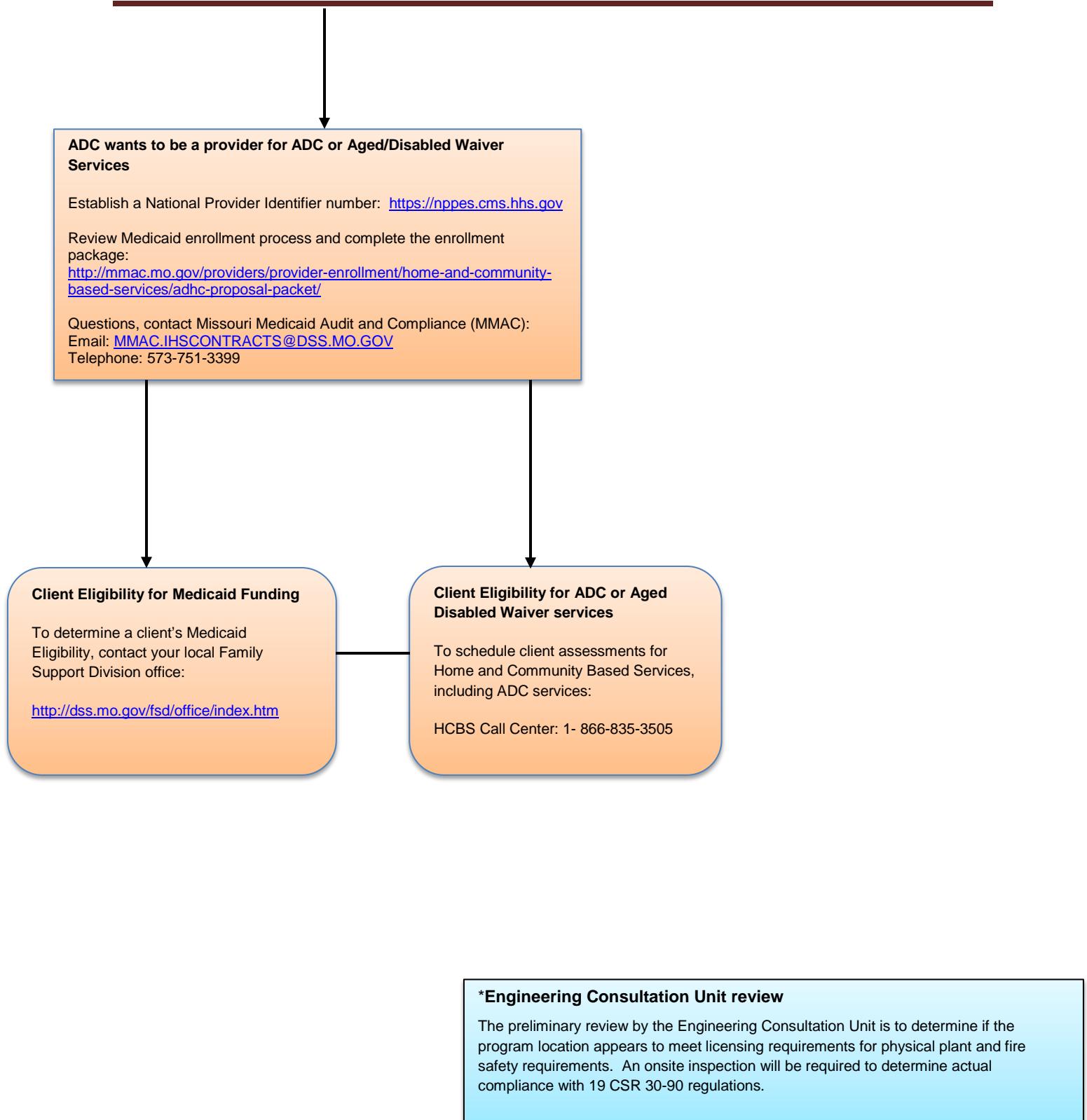
Opening an Adult Day Care Program – Flow chart (post inspection)



Change of Operator – Adult Day Care Program Flow Chart

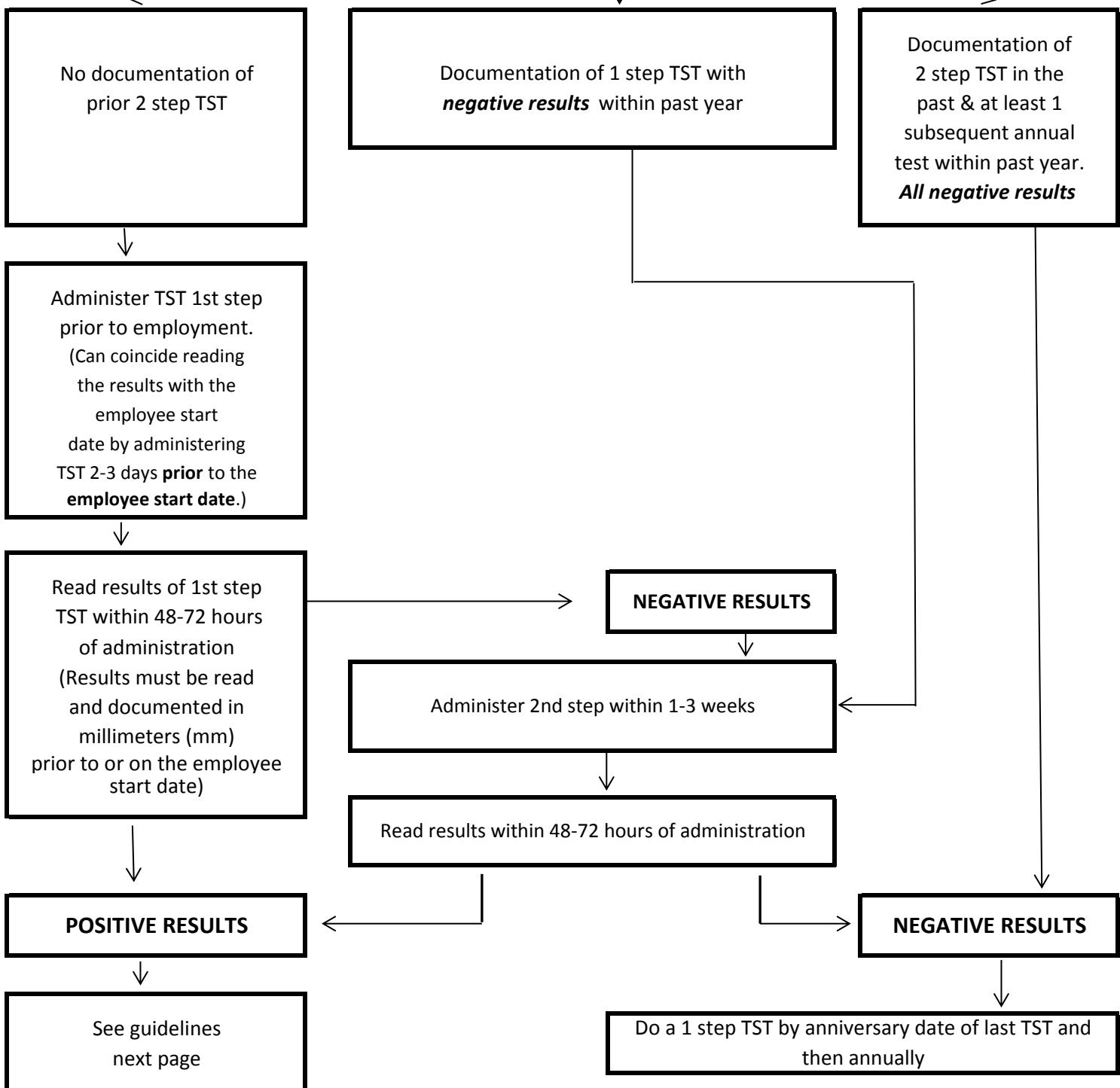


Change of Operator – Adult Day Care Program Flow Chart





TB SCREENING FOR LONG TERM CARE EMPLOYEES
Employee accepts position (**the hire date**)



Hire Date = the date the employee accepts the position

Employee Start Date = the date the employee starts work for compensation

The employee cannot start work for compensation until the 1st step TST is administered and read. A positive result would require a chest x-ray prior to starting work.

Per the CDC, it is acceptable to substitute IGRA blood tests for TSTs

LPHA = Local Public Health Agency

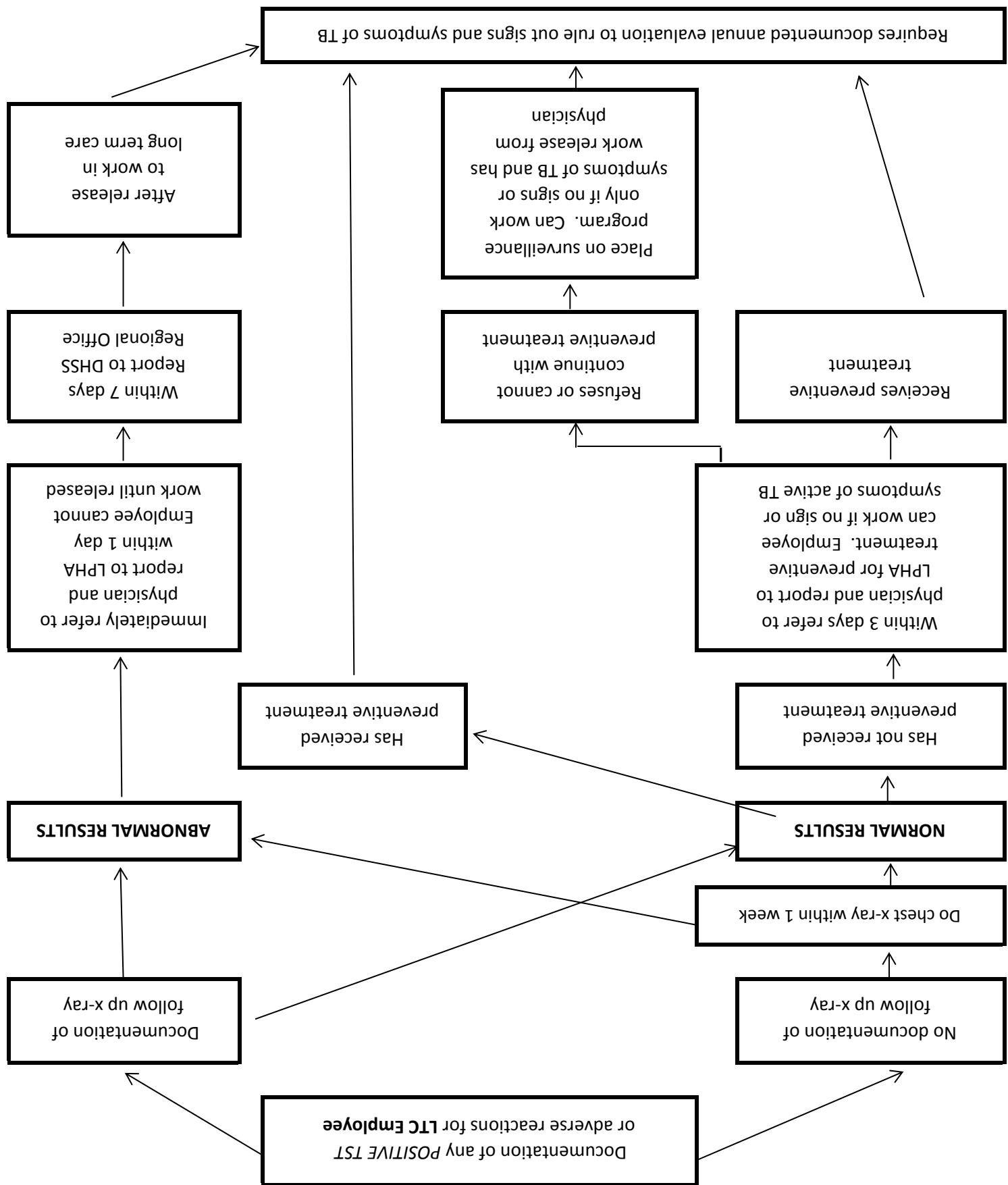
lGRIA = Interferoh - Gamma Release Assay

CDC = Centres for Disease Control

IB = Under Cuius S

TST = Tuberculin Skin Test

Requires documented annual evaluation to rule out signs and symptoms of TB



EMERGENCY PLAN

(To remove SAMPLE TEMPLATE watermark: Page layout/Watermark/Remove Watermark)

For Review:

- **Insert info**
- **See regulation**

Add pictures or facility floor plan here

Note: This template has been prepared as a tool to assist adult day care programs in developing a disaster preparedness plan. You may use any or all of the template in order to enhance or develop the program's emergency plan. You should refer to current Missouri Adult Day Care licensure regulations to ensure you have included the minimum standards regarding written plans that assure the safety of participants, staff and volunteers in case of fire or other disaster. **See 19 CSR 30-90.070 (2) and other applicable regulations.**

Additionally, the Missouri Department of Health and Senior Services has prepared **Ready-in-3 Disaster and Emergency Planning** videos on various topics and for different audiences, such as adult care populations, which may be viewed online at <http://health.mo.gov/emergencies/readyin3/> and/or ordered by calling 573-526-4768.

<Name of Adult Day Care Program>
<Owner/Operator/Director First and Last Name>
<Address>
<City, State, Zip>
<Telephone>
<Email Address>

<Date of Plan>
<Date of last review>

Public Safety Visits/Emergency Plan Consultation			
Date	Type	Name / Title	Comments

Coordination with Fire Safety Authority (Fire Drill and Evacuation Procedures)			
Date	Type	Name / Title	Comments

DISASTER AND EMERGENCY PLAN FOR

<Name of adult day care program>

I. Purpose

This emergency plan has been developed to assist **<Name of program>** in protecting the health and safety of the participants, staff and volunteers should a disaster or emergency, be it natural or deliberate, affect the program, operation or its community. The safety of the participants and staff is the primary goal of **<Name of adult day care program>**.

II. Assignment of Responsibilities

<Staff member(s)> are responsible for implementing the disaster and emergency plan and ensuring the safety of the program participants.

It is the responsibility of all staff to understand their roles and responsibilities and the location of the supplies in the event of an emergency.

III. Location of Daily Participant's Attendance, Emergency Contacts and Emergency Supplies

Participant's daily attendance records are kept **<location of attendance records>**. The participant's attendance records are updated as they arrive and leave throughout the day.

Participant's Emergency Contact Information is kept **<location of emergency contact information>**.

In a widespread disaster, we need to be prepared to care for the participants in the program until assistance arrives. Emergency supplies are stored **<location of emergency supplies>**. These supplies are updated every **<timeframe>**.

IV. Participants in Care

The program is licensed to care for **<number of participants>** participants.

Describe each particular type of disability or other special need the program cares for below (do not include names):

< disability or other special need>

< disability or other special need>

< disability or other special need>

V. **Emergency Assessment**

Below is a list of possible disaster or emergencies that may affect the program or the area.

Types of emergencies and/or Hazardous situations

(Retain all that apply and add additional as needed.)

<input type="checkbox"/> Disgruntled Parents/ Guardians / Employees	<input type="checkbox"/> Hazardous Material Exposure	<input type="checkbox"/> Power Failure
<input type="checkbox"/> Earthquake	<input type="checkbox"/> Ice and Snow Storms	<input type="checkbox"/> Extreme Heat or Cold
<input type="checkbox"/> Flooding	<input type="checkbox"/> Medical Emergencies	<input type="checkbox"/> Severe Weather; Tornado – Watch / Warning
<input type="checkbox"/> Fire / Smoke / Bomb Threat	<input type="checkbox"/> Missing Participant	<input type="checkbox"/> Water Line Disturbance
<input type="checkbox"/> Gas Leak	<input type="checkbox"/> Potentially Violent Situation	<input type="checkbox"/> Other _____

VI. **Types of Emergency Response**

Refer to Emergency Assessment above. Include staff responsibilities and assignments.

Medical Emergencies

(Refer to appropriate regulation, if applicable)

<describe procedure>

<describe staff responsibilities and assignments>

Example: Assess the situation and contact 911, if necessary. Notify the participant's caregiver or emergency contact immediately. Document the date and circumstance regarding the medical emergency in the participant's record.

Lock Down / Shelter in Place

Location: **<location>**

All staff are to stay in the lock down / shelter in place areas until an all clear is given.

<describe procedure>

<describe staff responsibilities and assignments>

Fire and Smoke

Work with state or local fire authority

<describe procedure>

<describe staff responsibilities and assignments>

Example: Fire and smoke will be announced by the alarm system, isolation of fire and smoke would include confinement by closing doors to the fire area. An emergency phone call will be made to appropriate emergency personnel, etc.

Evacuation

<describe procedure>

<describe staff responsibilities and assignments including assisting participants with special needs>

Example: Evacuate the facility to go to another location nearby or far away to remain safe. Evacuation maps are posted <describe locations>. The map outlines where the staff and participants will go in the event of an evacuation emergency.

Two off-site locations are listed below:

1st Evacuation Location

Location: <Location>

Address: <Physical Address>

City, State Zip: <City, State, Zip>

Telephone Number: <Telephone Number>

2nd Evacuation Location

Location: <Location>

Address: <Physical Address>

City, State Zip: <City, State, Zip>

Telephone Number: <Telephone Number>

Transportation plan for evacuation:

<describe how you are going to get participants to the evacuation location>

Tornado Watch/Warning

<describe procedure>

<describe staff responsibilities and assignments>

Other...

<describe procedure>

<describe staff responsibilities and assignments>

Other...

<describe procedure>

<describe staff responsibilities and assignments>

VII. Fire or Safety Hazard Assessment

List potential fire or safety hazards on the premises

(Retain all that apply and add additional as needed.)

<input type="radio"/> Hazardous Chemicals	<input type="radio"/> Carbon monoxide exposure	<input type="radio"/> Pilot light/open flame
<input type="radio"/> Locked exit doors	<input type="radio"/> Oxygen equipment	<input type="radio"/> Furnace/boiler room
<input type="radio"/> Evacuation routes blocked	<input type="radio"/> Highly combustible materials	<input type="radio"/> Gas appliance
<input type="radio"/> Damaged floors	<input type="radio"/>	<input type="radio"/>
<input type="radio"/> Other	<input type="radio"/> Other	<input type="radio"/> Other

VIII. Actions and Procedures to minimize potential dangers of fire or safety hazards identified above.

Hazardous Chemicals

<describe specific hazard and procedure>

Locked exit doors

<describe specific hazard and procedure>

Evacuation routes blocked

<describe specific hazard and procedure>

Carbon monoxide exposure

<describe specific hazard and procedure>

Pilot light/open flame

<describe specific hazard and procedure>

Other

<describe specific hazard and procedure>

The program will conduct and document the following fire hazard and safety checks to minimize potential danger: (see hazard list above)

- <frequency> check battery strength of smoke detectors
- <frequency> check adequate pressure of fire extinguishers
- <frequency> check <include other fire safety features>
- <frequency> check evacuation routes unobstructed
- <frequency> check <insert>

IX. Fire and Safety Training & Drills

Coordinate with local fire safety authority

<insert staff member> is responsible for **documentation** of periodic drills and training that includes all staff, volunteers and participants.

All program staff, volunteers and participants will participate in fire and disaster drills.

Fire drills will be conducted <insert schedule – monthly>

Describe how the drill will be conducted, including staff responsibilities and assignments

Evacuation drills <insert schedule- month, quarter?>.

Describe how the drill will be conducted, including staff responsibilities and assignments

Tornado drills <insert schedule- month, quarter?>.

Describe how the drill will be conducted, including staff responsibilities and assignments

<insert other drill> <insert schedule- month, quarter?>.

Describe how the drill will be conducted, including staff responsibilities and assignments

All staff and volunteers will receive training on safety responsibilities and actions to be taken if an emergency situation occurs that consists of:

<describe the training>

Example:

- Familiarity with the emergency plan
- Fire alarm and extinguisher training
- Evacuation procedures <insert >
- Other <insert >
- Other <insert >

New staff and volunteers will receive the training <insert schedule>

Existing staff and volunteers will receive the training <insert schedule>.

X. Access to Disaster and Emergency Preparedness Plan

A copy of the Disaster and Emergency Preparedness Plan will be available <location>, and at all times accessible to staff and volunteers.

<Program Name>
<Program Address>
<Program Phone Number>

Emergency Contact Numbers

All Emergencies	911
Poison Control Center	1-800-366-8888
Fire Department	<Number>
Police Department	<Number>
Ambulance Service	<Number>
<Local Media>	<Number>
Program Director <Name>	<Number>
Owner/Manager of building <Name>	<Number>
Principle place of business (if operated at more than one location) <Name>	<Number>

Caregiver / Guardian Contact Information

<Date>

Dear Caregiver / Guardian:

In the event of an emergency situation, <Name of Program>, has outlined the below response plan. Please know that <Name of Program>, will make every attempt to notify you so it is vital that you keep your emergency contact information up-to-date. Keep this letter with you so that you will know how to contact us in the event of an emergency.

Evacuation / Relocation

1. If the emergency is confined to the immediate area at the <Name of Program>, e.g. fire, and the participants cannot stay on the premises, the participants will be taken to <Name of off site location>. The participants and staff will remain at this location while you or your emergency contact is notified of the situation.
2. If the emergency is more wide spread and encompasses a larger area such as the neighborhood due to an environmental threat, e.g. flood, and the participants cannot remain in the immediate area, they will be transported to <Name of off site location(s)>. The participants and staff will remain at this location while you or your emergency contact is notified of the situation.

Notification

1. Every effort will be made to contact you as soon as the participants and staff are safe. If we cannot reach you, we will contact your alternate emergency contact.

Emergency Supplies

1. We encourage you to bring individual emergency packs for each participant to keep at our facility that includes a change of clothes, a few family photos and a comfort item to help comfort your participant during a crisis. These individual packs will be stored in our safe room and only accessed during an emergency.

Please rest assured that <Name of Program> staff will remain with and care for the participants at all times during an emergency to ensure the participant's safety. As always, please don't hesitate to contact me if you have any questions or concerns.

Sincerely,

<Director/Owner>

Diagram of Routes to Safe Location inside the Facility

Diagram of Exit Routes to Safe Location Outside of Facility

This checklist has been prepared as a tool to assist adult day care programs in developing a disaster preparedness plan. You may use any or all of the checklist in order to enhance or develop the program's emergency plan. You should refer to current Missouri Adult Day Care licensure regulations to ensure you have included the minimum standards regarding written plans that assure the safety of participants, staff and volunteers in case of fire or other disaster. See 19 CSR 30-90.070 (2) and other applicable regulations.

See regulation

DISASTER AND EMERGENCY PREPAREDNESS CHECKLIST

Adult Day Care (ADC)

ADC Program _____
Director _____ Date _____

- Program has **written Disaster and Emergency Plan**
- Plan developed **in consultation with state or local fire authorities.**
- Plan identifies possible hazards that might occur (Hazard Vulnerability Assessment)
- Plan identifies possible fire or safety hazards on the premises (Fire and Safety Hazard Assessment)
- Program **coordinates Fire Drills with local fire safety authority.**

PLAN INCLUDES:

- Identification of staff responsible for implementing plan and ensuring safety of participants
- Location of daily participant's attendance records
- Location of emergency contact information for participant
- Location of emergency supplies
- Local Emergency Contact Information, specific to facility location
 - Name, Address, and telephone number of facility
 - Emergency numbers
 - 911
 - Fire Department
 - Police Department
 - Ambulance Service
 - Poison Control
 - Name and telephone number of the facility's principle place of business if operated at more than one location
 - Name and telephone number of the owner or manager of the building if not owned by facility
- Diagram that identifies exit routes from each area of the facility used for to a safe location outside the facility
- Diagram that identifies routes to safe location inside the facility

PLAN CONSIDERS:

- Ages of participants
- Mental ability of participant
- Types of disability of other special needs of participants (ambulatory, nonambulatory, etc.)
- The need for on-going communication with other agencies providing services to participant and with state and local disaster emergency management agencies

PLANS ARE INCLUDED FOR RESPONSE TO FIRE OR OTHER DISASTER (see Hazard Vulnerability Assessment):

- Plan developed in consultation with state or local fire authorities
- Evacuation (fire, flood, chemical exposure, bomb threat, etc)
 - Transportation
- Shelter in Place (tornado, earthquake, severe storm, etc)
- Utility Failure (power, water, etc)
- Missing Participant (elopement, etc)
- Lock-down (intruder, shooting, trespasser)
 - Designate where staff should keep participants (in their rooms or other designated area)
 - Staff responsibility to account for all participants and to ensure no one leaves the safe area until "all clear" is announced
- Evacuation from a Vehicle, if applicable (accident, flooded road, etc)
- Other Disasters Likely to Affect Area (see Hazard Vulnerability Assessment)

PROCEDURES INCLUDE, AT MINIMUM:

- Use of alarms
- Emergency call to 911 or fire department
- Isolation of fire, closing doors to fire area
- Evacuation of building
- Identify two (2) off-site locations as meeting places (location other than the facility)
- Plan for relocation of staff and participants, including individuals with special needs and non-ambulatory participants to the off-site location
- System of contact for caregivers/guardians of participants
- Prior notification to caregivers/guardians of re-unification plan in the event of an evacuation

PLANS ARE INCLUDED FOR IDENTIFYING AND MINIMIZING POTENTIAL DANGER OF FIRE OR SAFETY HAZARDS on the premises (See Fire or Safety Hazard Assessment):

<input type="checkbox"/> Hazardous Chemicals	<input type="checkbox"/> Damaged floors
<input type="checkbox"/> Locked exit doors	<input type="checkbox"/> Carbon monoxide exposure
<input type="checkbox"/> Carbon Monoxide exposure	<input type="checkbox"/> Highly combustible materials
<input type="checkbox"/> Oxygen equipment	<input type="checkbox"/> Furnace/boiler room
<input type="checkbox"/> Pilot light/open flame	<input type="checkbox"/> Gas appliance
<input type="checkbox"/> Evacuation routes blocked	<input type="checkbox"/> Other _____

FIRE AND SAFETY TRAINING AND DRILLS:

- A written training plan and schedule for staff and volunteers on safety responsibilities and actions to be taken.

- Familiarity with emergency plan
- The use of fire extinguishers;

- Evacuation procedures
- Staff duties and responsibilities in an emergency
- Disaster drill procedures
- The use of and response to alarms
- other _____
- A written plan for conducting fire drills and other emergency procedures.
 - Fire drills coordinated with local fire safety authorities
 - Fire drills scheduled at least one per month
 - Includes staff responsibilities and assignments to ensure orderly evacuations and participants' safety.
- Staff assigned to assist participants with disabilities or other special needs
- Includes staff member responsible for documentation of periodic drills and training of staff, volunteers and participants.
- The plan includes all program staff, volunteer and participants in the fire and disaster drills
- Describes how the drills will be conducted, including staff responsibilities and assignments
- Includes a written schedule for periodic checks for battery strength of smoke detectors and adequate pressure of fire extinguishers.

ACCESS TO EMERGENCY INFORMATION:

- A copy of the facility's disaster and emergency preparedness plan is readily available
 - Posted by phone:
 - Local Emergency Contact Information, specific to facility
 - Diagrams of evacuation routes (to locations outside and inside the building)
 - Special instructions for non-ambulatory or special needs participants

ADDITIONAL COMMENTS



Division of Regulation and Licensure
Section for Long Term Care Regulation
 3418 Knipp Drive, Suite F
 P.O. Box 570
 Jefferson City, MO 65102-0570
 Phone: (573) 526-8524
 Fax: (573) 751-8493

Long Term Care Regions

Region 4

207 East McElwain Drive
 Cameron, MO 64429
 (816) 632-6541
 Fax: (816) 632-1810
Regional Manager: Candice Talbot
Region Supervisor: Carla Jennings

Region 5

1716 Prospect Drive, Suite C
 Macon, MO 63552
 (660) 385-5763
 Fax: (660) 385-4706
Regional Manager: Amy Rehard
Region Supervisor: Shay Patterson

Region 6

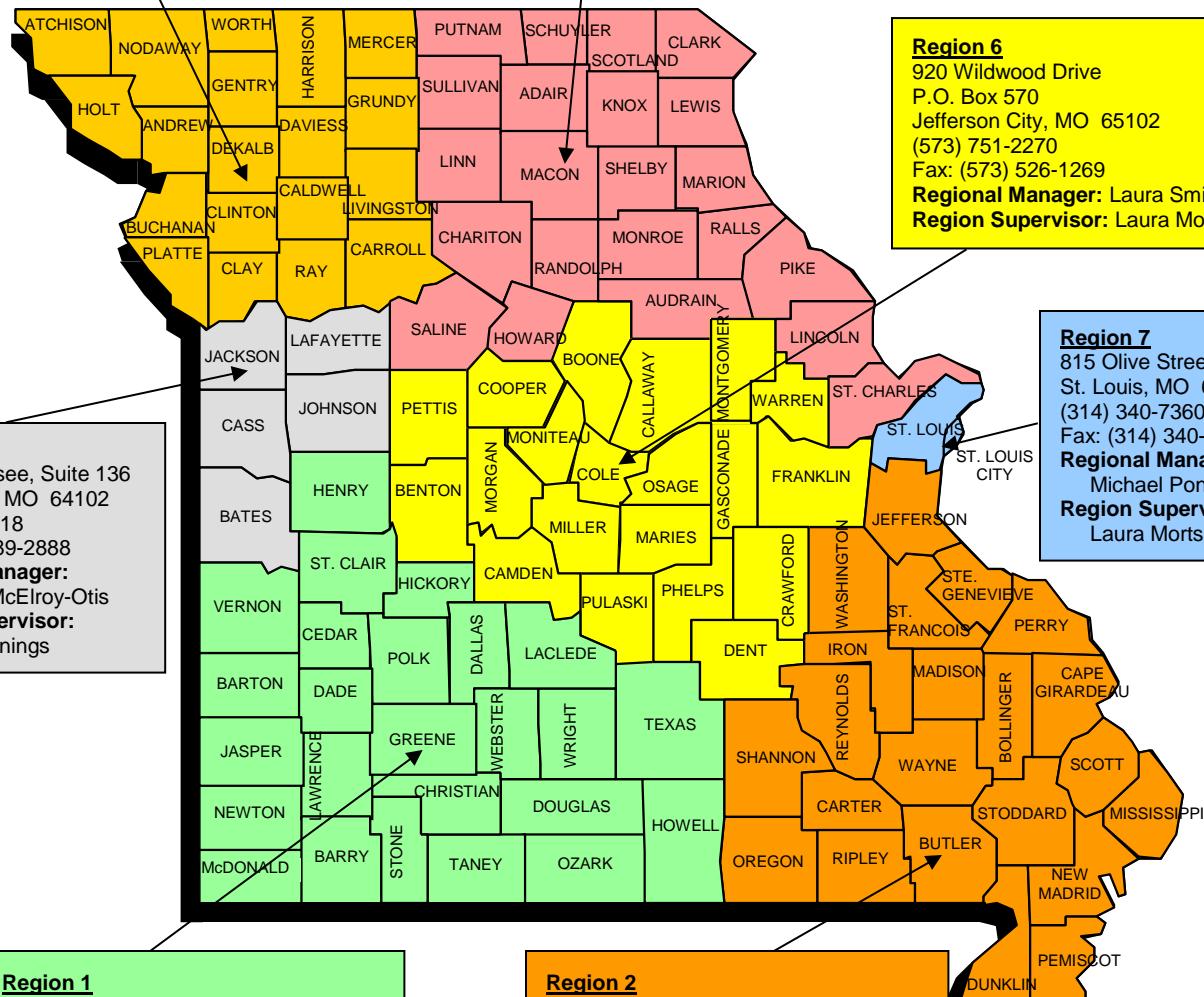
920 Wildwood Drive
 P.O. Box 570
 Jefferson City, MO 65102
 (573) 751-2270
 Fax: (573) 526-1269
Regional Manager: Laura Smith
Region Supervisor: Laura Morts

Region 3

1410 Genessee, Suite 136
 Kansas City, MO 64102
 (816) 889-2818
 Fax: (816) 889-2888
Regional Manager:
 Michele McElroy-Otis
Region Supervisor:
 Carla Jennings

Region 7

815 Olive Street, Suite 10
 St. Louis, MO 63101
 (314) 340-7360
 Fax: (314) 340-3414
Regional Manager:
 Michael Ponder
Region Supervisor:
 Laura Morts



Region 1

149 Park Central Square, Suite 429
 Springfield, MO 65806
 (417) 895-6435
 Fax: (417) 895-6290
Regional Manager: Ruth Tuttle
Region Supervisor: Carla Jennings

Region 2

2153 North Westwood
 Poplar Bluff, MO 63901
 (573) 840-9580
 Fax: (573) 840-9586
Regional Manager: Cindy Rexroad
Region Supervisor: Shay Patterson

Division of Senior and Disability Services Home and Community Services Regional Evaluation Teams

Jessica Bax, Division Director
Jake Luebbering, Deputy Director
Venice Wood, HCBS Section Administrator

Bureau of Home and Community Services

PO Box 570

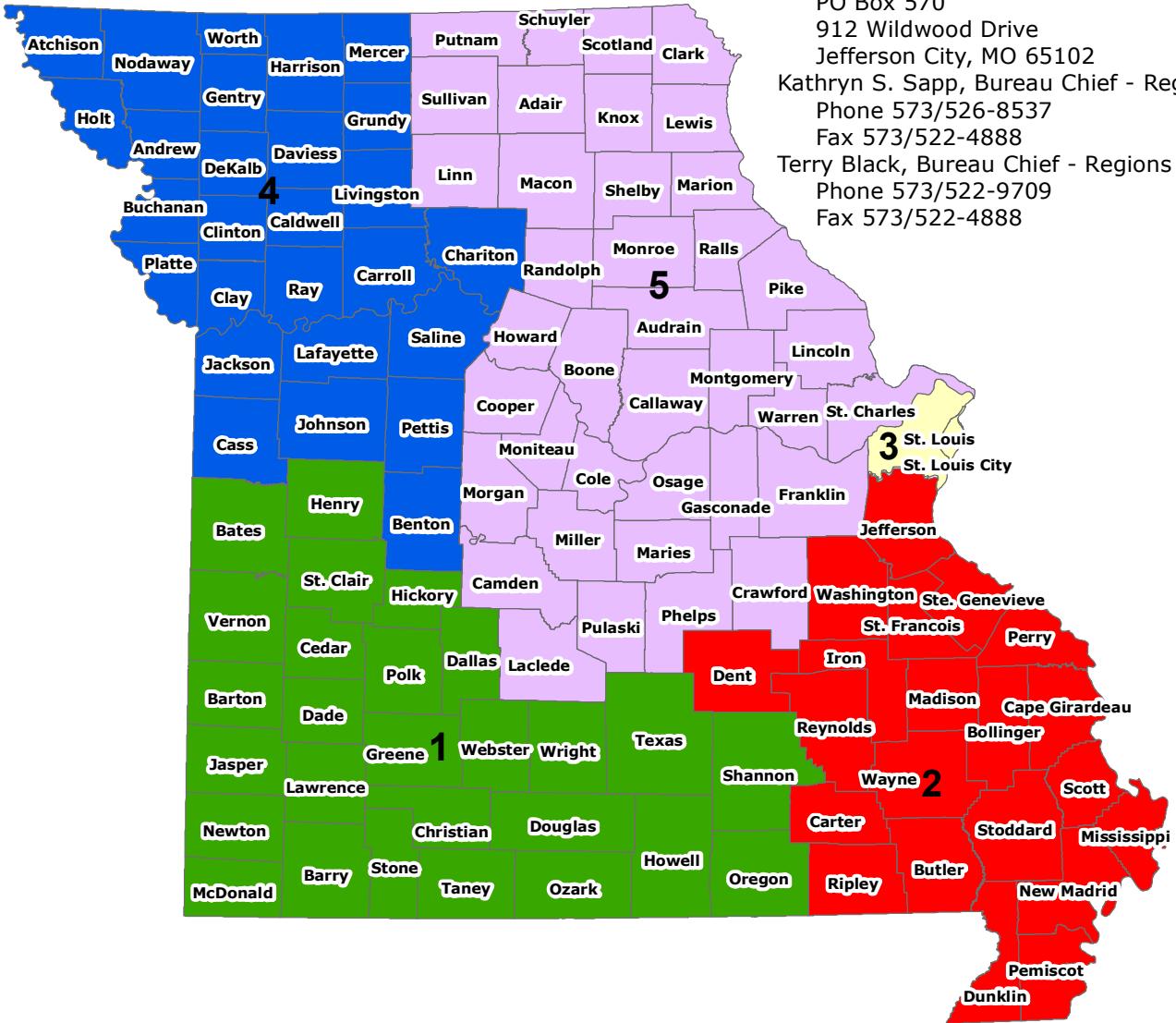
912 Wildwood Drive
Jefferson City, MO 65102

Kathryn S. Sapp, Bureau Chief - Regions 1, 4, and 5
Phone 573/526-8537

Fax 573/522-4888

Terry Black, Bureau Chief - Regions 2 and 3
Phone 573/522-9709

Fax 573/522-4888



Region 1

149 Park Central Square, Rm. 429
Springfield, MO 65806
PHONE 417/895-6455
FAX 417/895-1341

Region 2

471 Siemers Drive, Suite H
Cape Girardeau, MO 63701
PHONE 573/290-5781
FAX 573/290-5650

Region 3

815 Olive Street, Suite 10
St. Louis, MO 63101-1503
PHONE 314/340-7300
FAX 314/340-3467

Provider Reassessor Review Team

PHONE 573/751-6235
FAX 573/522-4888

Region 4

1410 Genessee, Suite 130
Kansas City, MO 64102
PHONE 816/889-2206
FAX 816/889-2004

Region 5

900 West Nifong, Suite 215
Columbia, Missouri 65203-4467
PHONE 573/441-6222
FAX 573/884-4884



Rules of Department of Health and Senior Services

Division 30—Division of Senior Services and Regulation Chapter 90—Adult Day Care Program Licensure

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**Title 19—DEPARTMENT OF
HEALTH AND SENIOR SERVICES**
**Division 30—Division of Senior Services
and Regulation**
**Chapter 90—Adult Day Care
Program Licensure**

19 CSR 30-90.010 Definitions

PURPOSE: The following definitions are listed to establish understanding of these terms as applied to Chapter 90, Adult Day Care Program Licensure.

(1) Adult day care program means a group program designed to provide care and supervision to meet the needs of five (5) or more functionally impaired adults for periods of less than twenty-four (24) hours but more than two (2) hours per day in a place other than the adult's own home.

(2) Adult day care provide means the person, corporation, partnership, association or organization legally responsible for the overall operation of the adult day care program.

(3) Adult day health care means an adult day care program certified to provide Medicaid reimbursed services to Medicaid-eligible participants in accordance with standards set forth in 19 CSR 70-92.010.

(4) Alzheimer's special care unit or program means any adult day care program that provides a designated separated unit or program for participants with a diagnosis of probable Alzheimer's disease or related disorder, to prevent or limit access by a participant outside the designated or separated area; or that advertises, markets or promotes the adult day care program as providing Alzheimer's or dementia care services.

(5) Applicant means any person, corporation, partnership, association or organization which has submitted an application to operate an adult day care program, but has not yet been approved and issued a license or provisional license by the Division of Senior Services and Regulation.

(6) Associated adult day care program means an adult day care program which is located in a building also occupied by another organization established primarily to offer other services (for example: medical care, long-term care and human services) but has designated space and staff for an adult day care program which is in addition to the existing space and staffing requirements for the residents, patients or clients.

(7) Department means the Missouri Department of Health and Senior Services.

(8) Direct care staff means those staff (paid and volunteer) assigned to take care of the direct needs of participants.

(9) Division means the Division of Senior Services and Regulation of the Missouri Department of Health and Senior Services.

(10) Freestanding adult day care program means a program of adult day care services which does not share staffing or licensed space or any physical components of space, equipment, furnishings, dietary, security, maintenance or utilities utilized in the provision of services with any other organization.

(11) Functionally impaired adult. An individual aged eighteen (18) or older who, by reason of age or infirmity, requires care and supervision.

(12) Immediate danger means a situation or condition which presents a substantial likelihood of death, life-threatening injury or serious physical or mental harm to a participant.

(13) Individual plan of care means the adult day care provider's written description of the amount, duration and scope of services to be provided to each individual participant.

(14) License means the document issued by the Division of Senior Services and Regulation in accordance with the provisions of sections 199.025 and 660.403 through 660.420, RSMo to an adult day care program which authorizes the adult day care provider to operate the program in accordance with the provisions of sections 199.025, and 660.403 to 660.420, RSMo and the applicable rules promulgated pursuant thereto.

(15) Licensed nurse means a person currently licensed under the provisions of Chapter 335, RSMo to engage in the practice of practical nursing or professional nursing.

(16) Long-term care facility means a "facility" as defined in section 198.006(6) or a "long-term care unit" as defined in 19 CSR 30-20.040.

(17) Medical care facility means a hospital, rehabilitation facility or other facility holding a valid state license to operate, issued by the Missouri Department of Health and Senior Services, as defined by 19 CSR 30-20.040.

(18) Participant means an adult who by reason of age or infirmity requires care and supervision and who is enrolled in an adult day care program.

(19) Person means any individual, firm, corporation, partnership, association, agency or any other business organization, including but not limited to limited liability companies, regardless of the name used.

(20) Program director means the individual person responsible for the on-site general administration of the adult day care program.

(21) Provisional license means the document issued by the division in accordance with the provisions of sections 199.025, RSMo and 660.403 through 660.420, RSMo to an adult day care program which is currently not meeting the requirements necessary to obtain a license.

(22) Related means any individual who is related to any of the following by reason of blood, marriage or adoption: parent, child, grandchild, brother, sister, half-brother, half-sister, stepparent, uncle, aunt, niece, nephew or first cousin.

(23) Volunteer means an individual who is utilized by the program to provide a direct care service to program participants with recurring contact whether or not supervised by other employees or volunteers.

AUTHORITY: sections 660.050, RSMo Supp. 2003 and 660.418, RSMo 2000.* This rule was originally filed as 13 CSR 15-8.010. Original rule filed Oct. 15, 1984, effective Jan. 11, 1985. Moved to 19 CSR 30-90.010, effective Aug. 28, 2001. Amended: Filed Sept. 14, 2004, effective March 30, 2005.

*Original authority: 660.050, RSMo 1984, amended 1988, 1992, 1993, 1994, 1995, 2001 and 660.418, RSMo 1984, amended 1993, 1994.

19 CSR 30-90.020 Licensure Requirements

PURPOSE: This rule establishes the general licensure and application procedures, fees and the rights of applicants for licensure of adult day care programs.

(1) Any person who establishes, maintains or operates an adult day care program, or advertises or holds himself or herself out as being able to perform any adult day care service, shall obtain the proper license from the division, except as provided in section (5) of this rule.



(2) An applicant shall submit the following documents to the division for each proposed associated or freestanding adult day care program:

(A) A fully completed, properly signed and notarized Application for License to Operate an Adult Day Care Program, included herein; and

(B) The required licensure fee.

(3) Every adult day care program that includes an Alzheimer's special care unit or program as defined in section 198.505, RSMo, shall submit to the division, as part of the licensure application or renewal, the following:

(A) A completed Alzheimer's Special Care Services Disclosure form (MO Form 886-3548), available at http://www.oa.state.mo.us/gs/form/fm_indiv.htm, stating how the care is different from the rest of the program in the following areas:

1. The Alzheimer's special care unit's or program's written statement of its overall philosophy and mission which reflects the needs of participants afflicted with dementia;

2. The process and criteria for placement in, or discharge from, the program;

3. The process used for assessment and establishment of the plan of care and its implementation, including the method by which the plan of care evolves and is responsive to changes in condition;

4. Staff training and continuing education practices;

5. The physical environment and design features appropriate to support the functioning of cognitively impaired participants;

6. The frequency and types of participant activities;

7. The involvement of families and the availability of family support programs;

8. The costs of care and any additional fees; and

9. Safety and security measures; and

(B) A document approved by the division which contains, but is not limited to, updated information on selecting an Alzheimer's special care unit or program.

(4) A nonrefundable fee shall accompany each adult day care program application for license according to the following schedule for licensed capacity which is the number of program participants who may be present at any one time:

(A) For eight (8) participants or fewer, the fee is twenty-five dollars (\$25);

(B) For nine through sixteen (9-16) participants, the fee is fifty dollars (\$50);

(C) For seventeen through twenty-four (17-24) participants, the fee is seventy-five dollars (\$75); and

(D) For twenty-five (25) or more participants, the fee is one hundred dollars (\$100).

(5) Unless the program has voluntarily submitted to licensure in accordance with section 660.409, RSMo, adult day care licensure requirements shall not apply to any:

(A) Adult day care program operated by a person in which care is offered for no more than two (2) hours per day;

(B) Adult day care program maintained or operated by the federal government except where care is provided through a management contract;

(C) Person who cares solely for persons related to the adult day care provider or who has been designated as guardian of that person;

(D) Adult day care program which cares for no more than four (4) persons who are not related to the adult day care provider as defined in 19 CSR 30-90.010;

(E) Adult day care program licensed by the Department of Mental Health under Chapter 630, RSMo, which provides care, treatment and habilitation exclusively to adults who have a primary diagnosis of mental disorder, mental illness, mental retardation or developmental disability; or

(F) Adult day care program administered or maintained by a religious not-for-profit organization serving a social or religious function if the adult day care program does not hold itself out as providing the prescription or usage of physical or medical therapeutic activities or as providing or administering medicines or drugs.

(6) The division shall review each application and investigate each applicant and adult day care program to determine if they comply with the adult day care licensure law and these regulations and to insure that the health and safety of the participants are protected.

(7) If the adult day care program and the applicant are found to be in compliance, a regular license will be issued for a period not to exceed two (2) years for the premises and persons named in the application.

(8) If an adult day care program is not currently meeting all of the requirements for licensure but demonstrates the potential capacity to meet the full requirements for licensure, a provisional license may be issued if there is no detriment to the health, safety and welfare of the participants in the program. The provisional license is nonrenewable and will be valid for a maximum of six (6) months. Any regular license issued subsequent to a provisional license will be valid for a period not to exceed two (2) years from the date that the provisional license was issued.

(9) Licensure renewal applications will be sent to adult day care providers at least sixty (60) days prior to the expiration date of the current license. Renewal applications must be accompanied by the required nonrefundable fee and be postmarked at least thirty (30) days prior to the expiration date of the current license.

(10) A regular or provisional license may be revoked or suspended for failure to comply with statutory or regulatory requirements. The division may revoke or suspend a license in any case in which it finds that the adult day care provider:

(A) Failed to comply with any lawful request from the division to inspect the premises or investigate any complaint to determine compliance with sections 660.403 through 660.420, RSMo;

(B) Falsified documents, records or any relevant information relating to the operation of the adult day care program;

(C) Placed participants in immediate danger whether or not the adult day care program or adult day care provider corrected the situation which placed participants in immediate danger; or

(D) Failed to achieve substantial compliance with statutory and regulatory requirements after being given a reasonable opportunity and period of time in which to correct the deficiencies cited by the division.

(11) If any person is refused a license, or a license is suspended or revoked, or other official action by the division is detrimental to the provider of an adult day care program, a determination from the Administrative Hearing Commission may be requested pursuant to provisions of section 621.045, RSMo et seq. This action must be taken within thirty (30) calendar days of official notification of the adverse action taken by the division.

(12) The license, or provisional license, issued to the adult day care provider, shall not be transferable when there is a change of ownership or when the program is moved to another location, building or premises.

(13) The application for an adult day care program license shall be signed by the applicant's owner, chairman of the board or chief executive officer and shall be notarized.



(14) The division may, subject to the considerations noted below, grant exceptions for specified periods of time to any rule imposed by the division if the division determines that the exception to the rule would not potentially endanger the health, safety or welfare of any participant in the adult day care program.

(A) The owner or operator of the adult day care program shall make requests for exceptions in writing to the director of the division. The requests shall contain:

1. If the exception request is being made due to a deficiency being cited, a copy of the latest Letter of Notification which indicates the violation;

2. The section number and text of the rule for which the exception is being requested;

3. Specific reasons why compliance with the rule would impose an undue hardship on the operator, including an estimate of any additional cost that might be involved;

4. An explanation of the relevant or extenuating factors; and

5. A complete description of the individual characteristics of the premises, program, participants or other factors that would safeguard the health, safety and welfare of the participants if the exception were granted.

(B) The division shall issue a written decision stating the reasons for approval or denial of the request for an exception. If approved, the length of time the exception will be in effect and any additional corrective factors upon which the exception is granted shall be stated in the decision.

(C) The division shall only grant exceptions to licensure requirements set out in rules imposed by the division and cannot grant exceptions to requirements established by state statutes, federal regulations or state regulations of other state agencies.



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
DIVISION OF SENIOR SERVICES AND REGULATION
SECTION FOR LONG TERM CARE

**APPLICATION FOR LICENSE TO OPERATE AN
ADULT DAY CARE PROGRAM**

RETURN COMPLETED APPLICATION AND APPLICATION FEE TO:
Division of Senior Services and Regulation
Adult Day Care Licensure Program/Fee Receipt Unit
P.O. Box 570
Jefferson City, MO 65102-0570

In accordance with the requirements of sections 660.400 through 660.420, RSMo (2000) and 19 CSR 30-90.010 through 19 CSR 30-90.080, an application is hereby made for licensure to establish, conduct or maintain an adult day care program as: (check one)

Free Standing Adult Day Care Program
 Associated Adult Day Care Program (List Name of Associated Organization)

Program Capacity:

DO NOT WRITE IN THIS SPACE

<input type="checkbox"/> New Facility	<input type="checkbox"/> Change of Owner
<input type="checkbox"/> Renewal	
Provisional License No.	Issued
Regular License No.	Issued
Effective Date	Expiration Date
Date Fee Received – Amount	
Check/Money Order Number	

FEES SCHEDULE

Check licensed capacity requested:

<input type="checkbox"/>	8 or fewer	\$25.00
<input type="checkbox"/>	9 through 16	\$50.00
<input type="checkbox"/>	17 through 24	\$75.00
<input type="checkbox"/>	25 or more	\$100.00

2. Name and address of Adult Day Care Program:

Telephone Number

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County (or City of St. Louis)

3. If a change of ownership, former name of adult day care program:

4. Type of provider of the adult day care program: (check one)

Governmental

City
 County
 State

Not-for-profit

Religious organization
 Corporation
 Other: _____

Proprietary

Individual
 Partnership
 Corporation

5. Name and address of provider:

Telephone Number

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County (or City of St. Louis)

6. Name, address and percentage of ownership of any individual or entity who owns an interest of five percent (5%) or more in the land, structure(s), mortgage or other obligation, or lease on which an adult day care program is being conducted. Indicate whether this ownership involves land, structure(s), mortgage or lease.



7. Name of adult day care program director:		
8. Has the program, provider director or any corporate officers, directors or holders of five percent (5%) or more stock or ownership ever been convicted of a misdemeanor relating to the operation of an adult day care program, long-term care facility or of any felony? <input type="checkbox"/> Yes <input type="checkbox"/> No		
If yes, list the person's name and type of conviction:		
9. Fire Safety and Facility Physical Requirements (for initial licensure applications only):		
<p>For Free Standing Adult Day Care Programs submit a diagram of the building that houses the adult day care program. This diagram shall be labeled to show exits; fire extinguishers; smoke detectors and room use, such as dining, crafts, quiet room, therapy or offices. This diagram shall give exact measurements of the area to be used for the adult day care program.</p> <p>For Associated Adult Day Care Programs submit a diagram of the designated space for the adult day care program. This diagram shall show the portion set aside for the adult day care program including office space; dining area; quiet area; craft area; general adult day care meeting area or therapy. This diagram shall give exact measurement of the area used for the adult day care program and also show the locations of exits or entrances for day care; fire extinguishers; and other fire safety features, such as pull stations and smoke detectors.</p>		
10. Is an Alzheimer's special care unit/program a part of this center? <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, then it is required MO Form 580-2637 (2-03), Alzheimer's Special Care Services Disclosure Form, be submitted with this application.)		
11. The fee must be submitted with this application. Enclose a check or money order ONLY payable to the Missouri Department of Health and Senior Services.		
<p>I hereby affirm that I, as an individual, or the operating corporation or partnership for which I sign, have adequate financial resources to properly construct, equip and operate the adult day care program referred to in this application, and hereby authorize the division to obtain information from third parties verifying this.</p> <p>I further affirm that I have read, understand and agree to abide by the provisions of sections 660.400 through 660.420, RSMo (2000), and the Adult Day Care Program Licensure rules of the Division of Senior Services and Regulation — specifically, 19 CSR 30-90.010 through 19 CSR 30-90.080.</p> <p>I further affirm that I understand that I am eligible for a license only if the program and the provider are in compliance with the law and the regulations thereunder, and that a license may be revoked at any time that the facility, provider or operator fail to comply with such laws and rules.</p> <p>I further affirm under the penalties of perjury, that all documents and information required by the division to be filed pursuant to this application are true and correct to the best of my knowledge and belief, that the statements contained in this application and any attached information are true and correct to the best of my knowledge and belief and that all required documents are either included with the application or are currently on file with the division.</p>		
MUST BE SIGNED IN PRESENCE OF NOTARY	Applicant's Signature	Date
	Print or Type Name	Telephone Number () -
Notary Public Embosser or Black Ink Rubber Stamp Seal	State of	County
	Signed and sworn to before me this _____ day of _____, 20____.	
	(Notary Public's Name)	
My commission expires _____, 20____.		



AUTHORITY: sections 660.050, RSMo Supp. 2003 and 660.418, RSMo 2000.* This rule was originally filed as 13 CSR 15-8.020. Original rule filed Oct. 15, 1984, effective Jan. 11, 1985. Moved to 19 CSR 30-90.020, effective Aug. 28, 2001. Amended: Filed Sept. 14, 2004, effective March 30, 2005.

*Original authority: 660.050, RSMo 1984, amended 1988, 1992, 1993, 1994, 1995, 2001 and 660.418, RSMo 1984, amended 1993, 1994.

19 CSR 30-90.030 Participants' Rights and Program Policies

(Rescinded March 30, 2005)

AUTHORITY: sections 660.050, RSMo Supp. 1992 and 660.418, RSMo 1986. This rule originally filed as 13 CSR 15-8.030. Original rule filed Oct. 15, 1984, effective Jan. 11, 1985. Moved to 19 CSR 30-90.030, effective Aug. 28, 2001. Rescinded: Filed Sept. 14, 2004, effective March 30, 2005.

19 CSR 30-90.040 Staffing Requirements

PURPOSE: This rule establishes the minimum requirements for adult day care program staff, ratio of numbers of staff to participants and staff training.

(1) The adult day care provider, as defined in 19 CSR 30-90.010, shall be responsible for assuring compliance with all applicable laws and rules.

(2) The adult day care program shall have a program director who is responsible for the day-to-day operation of the program. Either the program director or the program director's designee shall be present and in charge during all hours that participants are on the premises. The program director and any such designee shall be qualified by demonstrated competence, specialized background, education or experience to manage the day-to-day operation of an adult day care program.

(3) The program director's responsibilities shall include, but not be limited to:

(A) Managing the adult day care program as necessary for the health, safety and welfare of the participants;

(B) Complying with the laws and rules pertaining to the adult day care program;

(C) Ensuring that participants receive appropriate care according to their needs;

(D) Preserving the rights of participants;

(E) Meeting staffing, record keeping, facility and fire safety requirements;

(F) Directing and supervising staff, as required, to meet the needs of the participants;

(G) Conducting background checks and criminal record reviews as required and necessary to protect the health, safety and welfare of participants;

(H) Providing staff training as needed and appropriate to meet the needs of the participants; and

(I) Providing direct care services when necessary to meet the needs of the participants.

(4) Direct care paid staff shall be at least eighteen (18) years of age and qualified by education, training, experience or demonstrated competence in order to perform the duties required by the written job description.

(5) Volunteer staff shall be qualified by education, training, experience or demonstrated competence to perform the duties required by the written job description.

(6) The adult day care provider shall provide a sufficient number of direct care staff on duty at all times to meet the needs of each participant and assure that participants are never left unattended. At a minimum, there shall be at least two (2) direct care staff persons when two through sixteen (2-16) participants are present and one (1) additional direct care staff person for any portion of eight (8) additional participants present. In calculating the staffing ratios:

(A) The program director shall not be counted to meet the required direct care staff ratio if serving as an administrator or manager in a long-term care facility on the same premises;

(B) The program director may be counted only when it is necessary for the program director to provide direct care in order to ensure that the needs of the participants are met;

(C) In an associated adult day care program, direct care staff shall not be counted simultaneously to meet the required staffing ratios for both the long-term care or medical care facility and the associated adult day care or any other affiliated program;

(D) Secretaries, cooks, accountants and other staff members who provide no direct care shall not be considered in calculating the staffing ratio, but such staff may be counted only if and when they are providing direct care to the participants; and

(E) Trained volunteer staff at least eighteen (18) years of age may be counted in the direct care staff to participant ratio provided a written volunteer program description

includes in-service training and a system for ensuring the presence of volunteer help as scheduled.

(7) All staff who have direct contact with participants shall be able to perform the assigned job duties in the adult day care program and shall be free of communicable disease in accordance with the department's regulations pertaining to communicable diseases, specifically 19 CSR 20-20.010 through 19 CSR 20-20.100, as amended. Persons who have been diagnosed with a communicable disease may return to duty only with written approval from a physician or the physician's designated agent. The program director shall be responsible for monitoring the health of employees.

(8) No person shall be employed to work or allowed to volunteer, as defined in 19 CSR 30-90.010, in any capacity in the adult day care program who left or was discharged from employment with any other employer due to abuse or neglect to patients, residents or clients and the dismissal or departure has not been reversed by any tribunal or agency.

(9) Each adult day care provider shall require all new applicants for employment in positions involving contact with participants to:

(A) Disclose if he or she is listed on the Employee Disqualification List (EDL); and

(B) Disclose his or her criminal history, including any conviction or a plea of guilty to a misdemeanor or felony charge and any suspended imposition of sentence, any suspended execution of sentence or any period of probation or parole; and

(C) Sign a consent form authorizing a criminal record review with the Missouri Highway Patrol through:

1. The Missouri Highway Patrol in accordance with requirements of Chapter 43, RSMo; or

2. A private investigatory agency; or

3. The Family Care Safety Registry (FCSR), providing the applicant is registered and listed in the registry.

(10) The adult day care provider shall make periodic checks of the EDL to determine whether any current employee, contractor or volunteer has been recently added to the list. These checks shall be made at least every ninety (90) days by contacting the FCSR once the individual is registered and listed on the registry.

(11) Prior to allowing any person who has been hired as a full-time, part-time or temporary position to have contact with participants



pants, the adult day care provider shall, or in the case of temporary employees hired through or contracted for an employment agency, the employment agency shall prior to sending a temporary employee to a provider:

(A) Request a criminal background check for the person as provided in section 43.540, RSMo. Each adult day care provider must maintain in its records a copy of documents verifying that the background checks were requested and the nature of the response received for each such request:

1. The adult day care provider must ensure that any applicant or person hired or retained who discloses prior to the receipt of the criminal background check that he/she has been convicted of, pled guilty or *nolo contendere* to in this state or any other state, or has been found guilty of a crime, which if committed in Missouri would be a class A or B felony violation of Chapter 565, 566, or 569, RSMo, or any violation of subsection 3 of section 198.070, RSMo, or of section 568.020, RSMo, will not have contact with participants;

2. Upon receipt of the criminal background check, the adult day care provider must ensure that if the criminal background check indicates that the person hired or retained by the adult day care provider has been convicted of, pled guilty or *nolo contendere* to in this state or any other state, or has been found guilty of a crime, which if committed in Missouri would be a class A or B felony violation of Chapter 565, 566, or 569, RSMo, or any violation of subsection 3 of section 198.070, RSMo, or of section 568.020, RSMo, that person will not have contact with participants;

(B) Make an inquiry to the department whether the person is listed on the Employee Disqualification List as provided in section 660.315, RSMo; or

(C) If the person has registered with the department's Family Care Safety Registry, the adult day care provider may contact the Registry in order to meet the requirements of (11)(A) and (11)(B).

(12) All persons employed in an adult day care program shall be registered in the FCSR. Any person hired on or after the effective date of this rule, who is not listed in the Registry, shall complete a Worker Registration form (MO 580-2421), and submit it to the FCSR within fifteen (15) days of the beginning of employment pursuant to sections 210.900 through 210.936, RSMo and 19 CSR 30-80.010 through 19 CSR 30-80.040. The Worker Registration form may be downloaded from the Department of Health and

Senior Services website (<http://www.dhss.mo.gov/>).

(13) The adult day care program or adult day care provider shall use its business judgement in determining whether to utilize any person as an employee, independent contractor, or volunteer who is listed on the EDL.

(14) Any person who may be refused or terminated from employment based on a criminal history described in section 660.317.6, RSMo, may apply to the division for a good cause waiver under the provisions of 19 CSR 30-82.060.

(15) The adult day care provider may consider for employment any person who has been granted a good cause waiver in accordance with the provisions of section 660.317, RSMo and 19 CSR 30-82.060, in positions which have contact with participants. The adult day care provider shall be responsible for contacting the division to confirm the validity of an applicant's good cause waiver prior to hiring the applicant.

(16) At least one (1) staff person trained and certified in first aid and cardiopulmonary resuscitation (CPR) shall be on the premises and available at all times. First aid and CPR training shall be taken from the American Red Cross or from another comparable source. Certification in first aid shall be renewed every three (3) years and certification in CPR shall be renewed annually for each staff person assigned to and performing first aid and CPR responsibilities. The program director or designee shall be responsible for ensuring that first aid supplies recommended by the American Red Cross or other comparable source are readily available.

(17) All staff, including nondirect care, direct care and volunteers, shall be given an orientation to the adult day care program, its policies, fire, safety and emergency procedures prior to performing job responsibilities. The orientation shall be sufficient in depth to enable staff to perform their assigned job responsibilities and meet the individual needs of participants.

(18) At least quarterly, or as needed based on participants' needs, in-service training shall be provided to staff, as appropriate to their job function or participant care needs. At a minimum, in-service training shall address:

- (A) Participant care needs, both general and individualized;
- (B) Participants' rights;
- (C) Program policies; and

(D) Specialized care needs, such as Alzheimer's disease or related dementias, appropriate to the needs of participants, as follows:

1. For employees providing direct care to persons with Alzheimer's disease or related dementia, the training shall include—

- A. An overview of Alzheimer's disease and related dementia;
- B. Communicating with persons with dementia;
- C. Behavior management;
- D. Promoting independence in activities of daily living; and
- E. Understanding and dealing with family issues; and

2. For employees who do not provide direct care for, but may have daily contact with, persons with Alzheimer's disease or related dementia, the training shall include—

- A. An overview of dementia; and
- B. Communicating with persons with dementia.

AUTHORITY: sections 660.050, RSMo Supp. 2003 and 660.418, RSMo 2000.* This rule was originally filed as 13 CSR 15-8.040. Original rule filed Oct. 15, 1984, effective Jan. 11, 1985. Moved to 19 CSR 30-90.040, effective Aug. 28, 2001. Amended: Filed Sept. 14, 2004, effective March 30, 2005.

*Original authority: 660.050, RSMo 1984, amended 1988, 1992, 1993, 1994, 1995, 2001 and 660.418, RSMo 1984, amended 1993, 1994.

19 CSR 30-90.050 Program Policies and Participant Care Requirements and Rights

PURPOSE: This rule establishes the minimum requirements for operating an adult day care program and providing care to participants; establishing and preserving certain rights of participants; and requiring adult day care providers to have written program policies.

(1) The adult day care provider shall neither knowingly admit, nor continue to care for, participants whose needs cannot be met by the program directly or in cooperation with outside resources.

(2) Each adult day care provider shall have a written emergency medical plan that assures the following:

- (A) Transportation to a hospital or other type of facility providing emergency or urgent care;
- (B) A written agreement, signed by each participant or legal guardian, shall be on file



in the facility granting permission to transport the participant in need of emergency care to the designated hospital or other type of facility;

(C) Notes in the participant's record shall be made immediately of any accident, injury or illness and the emergency procedures taken;

(D) Emergency telephone numbers for each participant shall be available to staff at all times; and

(E) At a minimum, those first-aid supplies, as recommended by the American Red Cross or other comparable source, shall be readily available on-site.

(3) The adult day care provider shall require a medical assessment by the participant's physician or that physician's designated agent of the participant's medical condition to include activity needs and restrictions, dietary modifications, indicated therapies and medication as applicable prior to the first day of participation, signed by the physician or that physician's designated agent within five (5) working days of the first day of participation.

(4) The adult day care provider shall develop a written individual plan of care for each participant within five (5) contact days following the entry of the participant into the adult day care program. The plan shall be designed to maintain the participant at, or to restore to, optimal capability for self-care. The plan shall be based on a functional assessment and information obtained from the participant, participant's family, physician and the person or agency referring the participant. The plan shall address the participant's physical, social and psychological needs, goals and means of accomplishing goals to the degree that the program is designed and the staff are qualified to meet these goals. The plan shall identify the positions of persons responsible for specific individualized activities provided for the participant that are not documented by the regularly scheduled plan of activities for the program. The plan of care shall identify the participant's regularly scheduled days for attendance, including arrival and departure times. The plan of care shall be revised as frequently as warranted by the participant's condition, but shall be reviewed at least every six (6) months and updated as necessary.

(5) The program director or program director's designee shall maintain communication with participants and their families or other responsible persons to solve day-to-day problems which confront the participants. Refer-

rals to other community resources should be made and services coordinated as needed.

(6) The adult day care provider or program director or an other employee of the adult day care program shall report any suspected incidents of physical or mental abuse, neglect, exploitation, or a combination of these, of its participants to the Elderly Abuse and Neglect Hotline (1-800-392-0210).

(7) The adult day care provider is required to offer at least the following services:

(A) Activities of Daily Living. This includes providing assistance and training in walking, toileting, feeding, personal care and other activities of daily living in accordance with each participant's individual plan of care;

(B) Planned Group Activities. This includes providing planned activities during at least fifty percent (50%) of the time that the program is open for daily operation, with a maximum four (4) hours of planned activities required. Activities shall be suited to the needs and interests of participants and designed to stimulate interest, rekindle motivation and encourage physical exercise. Activities shall be conducted individually and in small and large groups. Planned activities include meals, rest periods, exercise, recreation and social activities. Physical exercise shall be designed in relation to each individual's needs, impairments and abilities and shall be alternated with rest periods or quiet activities;

(C) Food Service. This includes assuring the availability of meals and supplemental snacks in accordance with each participant's individual plan of care. Meals served by the adult day care provider shall provide at least one-third (1/3) of the recommended dietary allowance of the National Research Council. Supplemental snacks shall consist of nourishing food and beverages. Food may be prepared, stored, served, or any combination of these, on-site in compliance with the requirements of the local health department or applicable rule established by the department under the provisions of 19 CSR 20-1.010. Food prepared away from the site shall be prepared in a food preparation facility which meets the requirements of the local health department or applicable rules established by the department under 19 CSR 20-1.010. The adult day care provider shall arrange for special diets and other diet modifications as ordered by a physician or the physician's designated agent. Such diets shall be served as ordered by the participant's physician or the physician's designated agent with food preparation and service being reviewed by a qual-

fied dietitian, physician or nurse at least every six (6) months. Modified diets shall be in effect for the specified number of days indicated in the physician's order. If no time is specified, the period may not exceed one (1) calendar year, at which time another order from the physician shall be obtained; and

(D) Observation. The health, functional and psychosocial status of each participant shall be observed and documented in the participant's record at least monthly by the adult day care program director or other designated professional staff and the plan of care modified if necessary.

(8) The adult day care provider may offer the following services:

(A) Transportation. If transportation services are offered, directly or through a contract, they shall meet the requirements of 19 CSR 15-7.040;

(B) Counseling Services. If counseling services are offered, they shall be provided by qualified professional personnel;

(C) Rehabilitation Services. If rehabilitation services are offered, they shall be prescribed by a physician and performed by qualified therapists. Orders for the various therapies and treatments shall be in effect for the specified number of days indicated by the physician's written order. If no time period is specified, then the time period shall not exceed sixty (60) days and a new order by the physician must be obtained. Therapy services provided shall be summarized in the participant's record and progress noted at least monthly by the therapist;

(D) Medical Services. If medical services are offered, a licensed nurse shall be available at all times that the program is in operation. Medical services shall be provided in accordance with the particular needs of each participant. The licensed nurse shall be the only individual authorized to receive, control and manage the medication and drug program. The licensed nurse shall be responsible for the following:

1. A safe, effective system of identifying, handling and storing each participant's medications.

2. A system for administering and storing medications that is reviewed not less than every ninety (90) days by a licensed nurse.

3. Administration of medications and treatments, including the following requirements:

A. Participants who are responsible for taking their own medication at home shall be permitted and encouraged to continue to be responsible for taking their own medication during the hours spent in the program. If



a participant is unable to self-administer medication, then the adult day care provider shall assume responsibility in accordance with the applicable provisions of this rule. If a participant refuses medication, this refusal shall be documented in the participant's record and the participant and their primary caregiver informed of the possible consequences of not receiving the medication;

B. Medications or treatments may not be administered without an order signed by a licensed physician. Physician's phone orders may be taken only by a licensed nurse. Phone orders shall be written into the participant's record by the licensed nurse receiving them and shall be signed by that person. The physician shall sign and date the order within five (5) working days after giving the phone order;

C. Orders concerning treatments and medications shall be in effect for a specified number of days as indicated by the physician. If not specified, the period may not exceed sixty (60) days;

D. The licensed nurse shall communicate as indicated with the participant's physician to report observed changes in health status, including reaction to medications and treatments. If an adverse reaction to medications, treatments or diet is observed, the licensed nurse shall promptly notify the participant's physician. If contact cannot be made with the personal physician, emergency medical procedures shall be followed; and

E. All medications, including over-the-counter medications, shall be packaged and labeled in accordance with applicable professional pharmacy standards, state and federal drug laws and regulations. Labeling shall include accessory and cautionary instructions as well as the expiration date, when applicable and the name of the medication as specified in the physician's order. Over-the-counter medications for individual participants shall be labeled with at least the participant's name; and

4. Medication storage that meets the following requirements:

A. The adult day care provider shall have a safe, secure, locked place for storing medications or drugs and make them available to the participant according to the instructions of his or her personal physician;

B. Controlled substances shall be locked separately from non-controlled substance medications;

C. Medications requiring refrigeration shall be kept refrigerated in a locked room or in a separate locked refrigerator or in a locked box within the refrigerator or in a refrigerator in a locked room; and

D. Nonprescription medicines may be retained in the facility for administration as ordered by the participant's physician.

5. Medication records that meet the following requirements:

A. A written record of medications, including over-the-counter medications, administered shall be maintained;

B. Records shall be kept of the receipt and disposition of all controlled substances, separate from other records for two (2) years;

C. Inventories of controlled substances shall be reconciled at the time of the medication system review and as needed to ensure accountability;

D. Receipt records of controlled substances shall include the date, source of supply, resident name, prescription number, medication name and strength, quantity and signatures of the supplier and the receiver;

E. Administration records of controlled substances shall include the date, time, resident name, medication name, dose administered and signature of the person administering;

F. Documentation of waste of controlled substances at the time of administration shall include the reason for the waste and the signature of an authorized employee witness; and

G. All variances of controlled substance records shall be documented and reported to the director for review and investigation. All losses of controlled substances shall be reported to the appropriate authorities.

(9) Each participant of the adult day care program shall be assured of the following rights:

(A) To be treated as an adult, with respect and dignity regardless of race, color, sex or creed;

(B) To participate in a program of services and activities which promote positive attitudes regarding one's usefulness and capabilities;

(C) To participate in a program of services designed to encourage learning, growth and awareness of constructive ways to develop one's interests and talents;

(D) To maintain one's independence to the extent that conditions and circumstances permit, and to be involved in a program of services designed to promote personal independence;

(E) To be encouraged to attain self-determination within the adult day care setting, including the opportunity to participate in developing one's plan for services;

(F) To decide whether or not to participate in any given activity and to be involved in the extent possible in program planning and operation;

(G) To be cared for in an atmosphere of sincere interest and concern in which needed support and services are provided;

(H) To have access to a telephone to make or receive calls, unless necessary restrictions are indicated in the individual's care plan;

(I) To have privacy and confidentiality;

(J) To be free of mental or physical abuse;

(K) To be free to choose whether or not to perform services for the program;

(L) To be free of restraint, unless under physician's order as indicated in the individual's care plan; and

(M) To be free of interference, coercion, discrimination or reprisal.

(10) Participants and their families shall be advised of participants' rights and program policies upon admission to the adult day care program.

(11) Participants' rights shall be posted in a conspicuous location in the adult day care facility.

(12) The adult day care provider shall have a written program description, copies of which are available to the division, participants, families and other interested agencies and individuals. The written program description shall contain at least the following:

(A) Administrative organization, including role of the advisory committee if applicable;

(B) Maximum number of participants that can be served;

(C) Types of participants that shall and shall not be admitted;

(D) Days of the week and hours of operation;

(E) Services available to participants and families;

(F) Procedures and requirements for admission;

(G) Emergency arrangements for participants;

(H) Criteria and procedure for discontinuing service to a participant;

(I) Participant and family procedures for resolving grievances;

(J) Confidentiality of participant information and records; and

(K) A copy of the Alzheimer's SCS form (MO FORM 886-3548) (if applicable) available at http://www.oa.state.mo.us/gs/form/fm_indiv.htm

AUTHORITY: sections 660.050, RSMo Supp. 2003 and 660.418, RSMo 2000. This rule was originally filed as 13 CSR 15-8.050. Original



rule filed Oct. 15, 1984, effective Jan. 11, 1985. Moved to 19 CSR 30-90.050, effective Aug. 28, 2001. Amended: Filed Sept. 14, 2004, effective March 30, 2005.

**Original authority: 660.050, RSMo 1984, amended 1988, 1992, 1993, 1994, 1995, 2001 and 660.418, RSMo 1984, amended 1993, 1994.*

19 CSR 30-90.060 Record Keeping Requirements

PURPOSE: This rule describes the minimum requirements for administrative, participant and program records that the adult day care provider shall maintain.

(1) The adult day care provider shall maintain administrative records that include at least:

(A) Written personnel policies which address, at a minimum, the staffing requirements found in 19 CSR 30-90.040;

(B) An organizational chart depicting lines of supervision and responsibility;

(C) Individual personnel records for both paid staff and volunteer staff who are counted in the staffing ratio that include the following:

1. Position title and written job description of the work tasks, responsibilities and qualifications of the job duties to be performed by each person;

2. Name, address, home telephone number, date of birth and Social Security number;

3. Licensure, certification or other documentation of professional qualification; such as copies of license, certification, as applicable;

4. Educational background;

5. Employment history, documentation of references checked prior to employment including the results of the criminal background checks and, if applicable, a copy of any good cause waiver granted by the department;

6. Documentation of Employee Disqualification List (EDL) or Family Care Safety Registry checks;

7. Annual evaluation of work performance;

8. Documentation of orientation and in-service training received;

9. Record of dates and hours worked for at least the previous calendar year;

10. Copies of contracts with consultants, as applicable;

11. Documentation of any communicable disease and a physician's or the physician's designated agent's written release stating that the employee or volunteer may return to work; and

12. Documentation of any current certification in first aid and cardiopulmonary resuscitation;

(D) Fiscal records that include documentation of program income and expenditures in accordance with generally accepted accounting procedures. However, either cash basis, accrual basis or modified accrual basis may be used as appropriate for the adult day care provider's business entity and tax status;

(E) Records of orientation and in-service training provided to staff and volunteers; and

(F) Inspection reports, for the past three (3) years from the local health authority, local fire authority, department, or division and any state or local inspecting authority.

(2) The adult day care provider shall maintain individual participant records that include at least:

(A) Identifying information consisting of the participant's name; address; home telephone number; sex; date of birth; legal guardian, if applicable; the name and telephone number of the person to be notified in case of emergency and at least one (1) alternate; next of kin; travel directions between the home and program location and transportation arrangements, if applicable;

(B) Physician's pre-admission medical report and recommendations and subsequent medical information;

(C) Individual plan of care and progress notes;

(D) A chart of medications administered and any reactions noted, if applicable;

(E) Documentation of any prescribed or modified diet provided;

(F) Daily attendance log for the previous calendar year; and

(G) Documentation regarding any accidents or incidents.

(3) The adult day care provider shall maintain program records that include, at a minimum, copies of:

(A) Current written program description in accordance with 19 CSR 30-90.050;

(B) Current list of participants' rights;

(C) Schedule of daily group activities planned and record of activities actually conducted for the previous four (4) calendar months;

(D) Weekly menus of meals planned and records of actual meals served for the previous four (4) calendar months;

(E) Emergency medical plan; and

(F) Fire safety plan.

(4) Records or any information regarding adult day care program participants shall be confidential and no information shall be

released without a written release of information signed by the participant or legal guardian except that records shall be available to the division for investigation of any complaint, program inspection, monitoring or technical assistance purposes.

(5) Records shall be maintained for no less than five (5) years unless otherwise specified in this rule. Current records shall be kept on site within the adult day care program. Inactive records may be maintained at another central location but in no case outside the state of Missouri. Any record requested by the department or the division shall be made available within twenty-four (24) hours of the request.

AUTHORITY: sections 660.050, RSMo Supp. 2003 and 660.418, RSMo 2000.* This rule was originally filed as 13 CSR 15-8.060. Original rule filed Oct. 15, 1984, effective Jan. 11, 1985. Moved to 19 CSR 30-90.060, effective Aug. 28, 2001. Amended: Filed Sept. 14, 2004, effective March 30, 2005.

**Original authority: 660.050, RSMo 1984, amended 1988, 1992, 1993, 1994, 1995, 2001 and 660.418, RSMo 1984, amended 1993, 1994.*

19 CSR 30-90.070 Fire Safety and Facility Physical Requirements

PURPOSE: This rule establishes the minimum physical and maintenance requirements for facilities in which adult day care programs are operated.

PUBLISHER'S NOTE: The secretary of state has determined that the publication of the entire text of the material which is incorporated by reference as a portion of this rule would be unduly cumbersome or expensive. This material as incorporated by reference in this rule shall be maintained by the agency at its headquarters and shall be made available to the public for inspection and copying at no more than the actual cost of reproduction. This note applies only to the reference material. The entire text of the rule is printed here.

(1) Facility Physical Requirements.

(A) The adult day care program building shall be safe and suitable for participants. The building in which the program is located shall be clean, of sound construction and maintained in good repair.

(B) Minimum space requirements shall be eighty (80) square feet per participant, for up to twenty (20) participants and an additional



fifty (50) square feet per each additional participant. Space requirements do not include office space, bathrooms, storage, examining rooms or dining rooms, unless the latter is also used for activities. For associated adult day care programs, the required space shall be designated and in excess of the particular facility's required licensed space for providing long-term care or medical care. For adult day health care programs, the required space, regardless of the number of participants, shall not be less than three hundred twenty (320) square feet of space.

(C) The facility shall have a room of sufficient size to meet the needs of the participants based on minimum standards where all of the participants can gather as well as rooms or divided areas for small group activities, including a quiet area for rest, which contains at least one (1) bed for temporary use by participants when needed.

(D) Furniture shall be of a size and design so that it is easily used by persons with limited agility. It shall be sturdy and secure so that it cannot easily tip when used for support while walking or sitting. At a minimum, the following shall be provided:

1. One (1) chair for each participant and staff person;

2. Table space adequate for all participants to be served a meal at a table at the same time;

3. Reclining lounge chairs or other sturdy comfortable furniture, the number to be determined by the needs of the participants; and

4. At least one (1) bed with adequate privacy in a quiet area to be available for temporary use by participants as needed.

(E) Equipment and supplies shall be adequate to meet the needs of participants including items necessary for personal care and materials to encourage activities among participants. The activity materials shall be geared to the interests and backgrounds of the participants.

(F) Ventilation by natural or mechanical means shall be provided. All screen doors shall be equipped with self-closing devices and shall fit tightly. Doors and windows and other openings to the outside shall be screened when necessary to prevent entrance of insects and vermin.

(G) The heating system for adult day care facilities initially licensed prior to December 1, 2004 shall be in compliance with the applicable provisions of the 2000 *Life Safety Code* for existing occupancies (NFPA 101), incorporated by reference in this rule, as published by the National Fire Protection Agency, 1 Batterymarch Park, PO Box 9101, Quincy, MA 02269-9101 and all state and local codes.

This rule does not incorporate any subsequent amendments or additions. Heating systems for adult day care facilities initially licensed on or after December 1, 2004 shall be in compliance with the applicable provisions of the 2000 *Life Safety Code* for New Day Care Occupancies, incorporated by reference in this rule, as published by the National Fire Protection Agency, 1 Batterymarch Park, PO Box 9101, Quincy, MA 02269-9101 and all state and local codes. This rule does not incorporate any subsequent amendments or additions. Exposed heating pipes, hot water pipes or radiators in rooms and areas used by participants shall be covered or protected, and insulated when appropriate. Portable space heaters shall not be used. Room temperatures shall be maintained between sixty-eight degrees Fahrenheit (68°F) and eighty-five degrees Fahrenheit (85°F) in all seasons. The reasonable comfort needs of individual participants shall be met.

(H) Illumination shall be adequate in all areas and commensurate with the type of activity. Glare shall be kept at a minimum by providing window coverings at all windows exposed to direct sunlight and using shaded light fixtures.

(I) All plumbing and plumbing fixtures shall conform to applicable local codes. There shall be no cross-connection between the potable water supply and any source of pollution through which the potable water supply might become contaminated.

(J) An adequate supply of water, the source of which is approved by the state water control authority, under sufficient pressure to properly serve the facility shall be provided. The potable water system shall be installed to preclude the possibility of backflow.

(K) Drinking water shall be easily accessible to the participants and provided by either an angle jet drinking fountain with mouth guard or by a running water supply with individual service drinking cups. Drinking facilities shall not be located in a toilet room.

(L) At least one (1) toilet and handwashing sink shall be provided for each ten (10) participants or any additional fraction thereof. The handwashing sink shall be in close proximity to each toilet and shall have hot and cold running water. The water temperature shall be maintained between one hundred degrees Fahrenheit (100°F) and one hundred fifteen degrees Fahrenheit (115°F). The toilet room shall be within easy access of the activity areas and afford the participants privacy. Each toilet room shall be equipped with approved natural or mechanical ventilation. All toilets shall have grab-rails. Individual paper towels, a trash receptacle, soap and toi-

let paper shall be provided at all times and shall be within reach of the participants.

(M) If persons using wheelchairs or persons with other physical disabilities are accepted, or the building in which the facility is located is otherwise required to comply with the Americans with Disabilities Act (ADA), the facility shall have ramps or other means of accessibility to the adult day care facility for persons with disabilities, and shall meet the standards of the *ADA Standards for Accessible Design* which are available at www.usdoj.gov/crt/ada/adastd94.pdf.

(N) Stairways and hallways shall be kept free of obstructions and shall be well lighted. All stairways and ramps shall have nonslip surface or treads. All inside and outside stairs and ramps shall have handrails.

(O) All rugs and floor coverings shall be secured to the floor. Throw rugs shall not be used. All equipment and furnishings shall be safe and maintained in good condition.

(P) The adult day care program shall provide necessary services to maintain the building or portion of the building in which the adult day care program is located in good repair and in a safe, clean, orderly and sanitary manner.

(Q) Drugs, cleaning agents, pesticides and poisonous products shall be stored apart from food, out of the reach of the participants, and shall be used in a manner which assures the safety of participants and staff.

(R) Wastebaskets and trash containers shall be made of noncombustible or fire-resistant material. Garbage and other waste shall be stored and disposed of in an appropriate manner.

(S) The facility shall be maintained free of insects and rodents. Control measures shall be implemented to prevent rodent and insect infestation.

(2) Fire Safety Requirements.

(A) Adult day care programs shall obtain annual written approval from the appropriate local fire safety officials, certifying that the facility complies with local fire codes. If there are no applicable codes, or if the department or division determines that such codes are not adequate, the department or division shall determine the adequacy of the means of egress and other measures for life safety from fire in accordance with the provisions of the *Life Safety Code* (NFPA 101), in order to ensure the safety of frail persons or persons with disabilities. All adult day care programs initially licensed prior to December 1, 2004 shall comply with the provisions of the 2000 *Life Safety Code* for existing occupancies (NFPA 101), incorporated by reference in this rule. Adult day care programs



licensed on or after December 1, 2004 shall comply with the provisions of the 2000 *Life Safety Code* for New Day Care Occupancies (NFPA 101).

(B) The facility shall have a minimum of two (2) exits remote from each other. Exits shall be clearly marked with exit signs and shall provide egress at ground level.

(C) Each adult day care provider shall locate, install and maintain in operable condition an adequate number of smoke detectors and fire extinguishers of the appropriate type as determined in consultation with the local fire authorities or the division. Fire extinguishers shall comply with the requirements of the 1998 *Standard for Portable Fire Extinguishers* (NFPA 10), incorporated by reference in this rule.

(D) A written plan for assuring the safety of participants, staff and volunteers in case of fire or other disaster shall be developed in consultation with state or local fire authorities and shall include, at a minimum, the following:

1. A written assessment of potential fire or safety hazards present on the premises and actions and procedures to follow to minimize potential danger;

2. A written schedule for periodic checks for battery strength of smoke detectors and adequate pressure of fire extinguishers;

3. A written training plan and schedule for staff and volunteers on safety responsibilities and actions to be taken if an emergency situation occurs and documentation of the type of training provided; and

4. A written plan for conducting fire drills and other emergency preparedness procedures, including staff responsibilities and assignments to ensure orderly evacuations and participants' safety.

(E) Fire drills shall be coordinated with local fire safety authorities and conducted at least one (1) time per month and with sufficient frequency to familiarize staff and participants with the proper evacuation procedures. Drills may be held at unexpected times and under varying conditions to simulate the unusual conditions that occur in the case of fire. The actual evacuation of participants and staff is not necessary providing everyone involved is able to carry out actual evacuation procedures if required. Fire drills shall include suitable procedures to ensure that all affected persons actually participate in the drill exercises.

(F) The program director or other staff qualified to exercise leadership shall be responsible for planning and conducting fire drills and other emergency preparedness procedures. The program director shall ensure that staff are assigned to assist participants

with disabilities or other special needs to ensure the health and safety of participants when implementing the fire and emergency preparedness procedures in evacuating the facility, or complying with written plan procedures.

AUTHORITY: sections 660.050, RSMo Supp. 2003 and 660.418, RSMo 2000. This rule was originally filed as 13 CSR 15-8.070. Original rule filed Oct. 15, 1984, effective Jan. 11, 1985. Moved to 19 CSR 30-90.070, effective Aug. 28, 2001. Amended: Filed Sept. 14, 2004, effective March 30, 2005.*

**Original authority: 660.050, RSMo 1984, amended 1988, 1992, 1993, 1994, 1995, 2001 and 660.418, RSMo 1984, amended 1993, 1994.*

19 CSR 30-90.080 Fire Safety Requirements

(Rescinded March 30, 2005)

AUTHORITY: sections 660.050, RSMo Supp. 1992 and 660.418, RSMo 1986. This rule was originally filed as 13 CSR 15-8.080. Original rule filed Oct. 15, 1984, effective Jan. 11, 1985. Moved to 19 CSR 30-90.080, effective Aug. 28, 2001. Rescinded: Filed Sept. 14, 2004, effective March 30, 2005.

Missouri Revised Statutes

Chapter 192

Department of Health and Senior Services

August 28, 2018

Division of aging created--duties-- inspectors of nursing homes, training and continuing education requirements-- promulgation of rules, procedure-- dementia-specific training requirements established.

192.2000. 1. The "Division of Aging" is hereby transferred from the department of social services to the department of health and senior services by a type I transfer as defined in the Omnibus State Reorganization Act of 1974. The department shall aid and assist the elderly and low-income disabled adults living in the state of Missouri to secure and maintain maximum economic and personal independence and dignity. The department shall regulate adult long-term care facilities pursuant to the laws of this state and rules and regulations of federal and state agencies, to safeguard the lives and rights of residents in these facilities.

2. In addition to its duties and responsibilities enumerated pursuant to other provisions of law, the department shall:

- (1) Serve as advocate for the elderly by promoting a comprehensive, coordinated service program through administration of Older Americans Act (OAA) programs (Title III) P.L. 89-73, (42 U.S.C. Section 3001, et seq.), as amended;
- (2) Assure that an information and referral system is developed and operated for the elderly, including information on home and community based services;
- (3) Provide technical assistance, planning and training to local area agencies on aging;
- (4) Contract with the federal government to conduct surveys of long-term care facilities certified for participation in the Title XVIII program;

- (5) Conduct medical review (inspections of care) activities such as utilization reviews, independent professional reviews, and periodic medical reviews to determine medical and social needs for the purpose of eligibility for Title XIX, and for level of care determination;
- (6) Certify long-term care facilities for participation in the Title XIX program;
- (7) Conduct a survey and review of compliance with P.L. 96-566 Sec. 505(d) for Supplemental Security Income recipients in long-term care facilities and serve as the liaison between the Social Security Administration and the department of health and senior services concerning Supplemental Security Income beneficiaries;
- (8) Review plans of proposed long-term care facilities before they are constructed to determine if they meet applicable state and federal construction standards;
- (9) Provide consultation to long-term care facilities in all areas governed by state and federal regulations;
- (10) Serve as the central state agency with primary responsibility for the planning, coordination, development, and evaluation of policy, programs, and services for elderly persons in Missouri consistent with the provisions of subsection 1 of this section and serve as the designated state unit on aging, as defined in the Older Americans Act of 1965;
- (11) Develop long-range state plans for programs, services, and activities for elderly and handicapped persons. State plans should be revised annually and should be based on area agency on aging plans, statewide priorities, and state and federal requirements;
- (12) Receive and disburse all federal and state funds allocated to the division and solicit, accept, and administer grants, including federal grants, or gifts made to the division or to the state for the benefit of elderly persons in this state;
- (13) Serve, within government and in the state at large, as an advocate for elderly persons by holding hearings and conducting studies or investigations concerning matters affecting the health, safety, and welfare of elderly persons and by assisting elderly persons to assure their rights to apply for and receive services and to be given fair hearings when such services are denied;
- (14) Conduct research and other appropriate activities to determine the needs of elderly

persons in this state, including, but not limited to, their needs for social and health services, and to determine what existing services and facilities, private and public, are available to elderly persons to meet those needs;

(15) Maintain and serve as a clearinghouse for up-to-date information and technical assistance related to the needs and interests of elderly persons and persons with Alzheimer's disease or related dementias, including information on the home and community based services program, dementia-specific training materials and dementia-specific trainers. Such dementia-specific information and technical assistance shall be maintained and provided in consultation with agencies, organizations and/or institutions of higher learning with expertise in dementia care;

(16) Provide area agencies on aging with assistance in applying for federal, state, and private grants and identifying new funding sources;

(17) Determine area agencies on aging annual allocations for Title XX and Title III of the Older Americans Act expenditures;

(18) Provide transportation services, home-delivered and congregate meals, in-home services, counseling and other services to the elderly and low-income handicapped adults as designated in the Social Services Block Grant Report, through contract with other agencies, and shall monitor such agencies to ensure that services contracted for are delivered and meet standards of quality set by the division;

(19) Monitor the process pursuant to the federal Patient Self-determination Act, 42 U.S.C. Section 1396a (w), in long-term care facilities by which information is provided to patients concerning durable powers of attorney and living wills.

3. The department may withdraw designation of an area agency on aging only when it can be shown the federal or state laws or rules have not been complied with, state or federal funds are not being expended for the purposes for which they were intended, or the elderly are not receiving appropriate services within available resources, and after consultation with the director of the area agency on aging and the area agency board. Withdrawal of any particular program of services may be appealed to the director of the department of health and senior services and the governor. In the event that the division withdraws the area agency on aging designation in accordance with the Older Americans Act, the department shall administer the services to clients previously performed by the area agency on aging until a new area agency on aging is designated.

4. Any person hired by the department of health and senior services after August 13, 1988, to conduct or supervise inspections, surveys or investigations pursuant to chapter 198 shall complete at least one hundred hours of basic orientation regarding the inspection process and applicable rules and statutes during the first six months of employment. Any such person shall annually, on the anniversary date of employment, present to the department evidence of having completed at least twenty hours of continuing education in at least two of the following categories: communication techniques, skills development, resident care, or policy update. The department of health and senior services shall by rule describe the curriculum and structure of such continuing education.

5. The department may issue and promulgate rules to enforce, implement and effectuate the powers and duties established in this section and sections [198.070](#) and [198.090](#) and sections [192.2400](#) and [192.2475](#) to [192.2500](#). Any rule or portion of a rule, as that term is defined in section [536.010](#), that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section [536.028](#). This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2001, shall be invalid and void.

6. Home and community based services is a program, operated and coordinated by the department of health and senior services, which informs individuals of the variety of care options available to them when they may need long-term care.

7. The division shall maintain minimum dementia-specific training requirements for employees involved in the delivery of care to persons with Alzheimer's disease or related dementias who are employed by skilled nursing facilities, intermediate care facilities, residential care facilities, agencies providing in-home care services authorized by the division of aging, adult day-care programs, independent contractors providing direct care to persons with Alzheimer's disease or related dementias and the division of aging. Such training shall be incorporated into new employee orientation and ongoing in-service curricula for all employees involved in the care of persons with dementia. The

department of health and senior services shall maintain minimum dementia-specific training requirements for employees involved in the delivery of care to persons with Alzheimer's disease or related dementias who are employed by home health and hospice agencies licensed by chapter 197. Such training shall be incorporated into the home health and hospice agency's new employee orientation and ongoing in-service curricula for all employees involved in the care of persons with dementia. The dementia training need not require additional hours of orientation or ongoing in-service. Training shall include at a minimum, the following:

- (1) For employees providing direct care to persons with Alzheimer's disease or related dementias, the training shall include an overview of Alzheimer's disease and related dementias, communicating with persons with dementia, behavior management, promoting independence in activities of daily living, and understanding and dealing with family issues;
- (2) For other employees who do not provide direct care for, but may have daily contact with, persons with Alzheimer's disease or related dementias, the training shall include an overview of dementias and communicating with persons with dementia.

As used in this subsection, the term "employee" includes persons hired as independent contractors. The training requirements of this subsection shall not be construed as superceding any other laws or rules regarding dementia-specific training.

(L. 1984 H.B. 1131 § 2, A.L. 1988 S.B. 602, A.L. 1992 S.B. 573 & 634, A.L. 1993 S.B. 52, A.L. 1994 H.B. 1335 & 1381, A.L. 1995 H.B. 409 merged with S.B. 445 merged with S.B. 3, A.L. 2001 H.B. 603, A.L. 2014 H.B. 1299 Revision § 192.1000)

*Transferred 2014; formerly 660.050

*Revisor's note: The term "residential care facilities" may include "assisted living facilities", see section [198.005](#) regarding changes to name reference.

Definitions.

[192.2200](#) . As used in sections [192.2200](#) to [192.2260](#), unless the context clearly indicates otherwise, the following terms mean:

- (1) "Abuse", the infliction of physical, sexual, or emotional injury or harm;
- (2) "Adult", an individual over the age of eighteen;
- (3) "Adult day care program", a group program designed to provide care and supervision to meet the needs of functionally impaired adults for periods of less than twenty-four hours but more

than two hours per day in a place other than the adult's own home;

- (4) "Adult day care provider", the person, corporation, partnership, association or organization legally responsible for the overall operation of the adult day care program;
- (5) "Department", the department of health and senior services;
- (6) "Functionally impaired adult", an adult who by reason of age or infirmity requires care and supervision;
- (7) "License", the document issued by the department in accordance with the provisions of sections [192.2200](#) to [192.2260](#) to an adult day care program which authorizes the adult day care provider to operate the program in accordance with the provisions of sections [192.2200](#) to [192.2260](#) and the applicable rules promulgated pursuant thereto;
- (8) "Operator", any person licensed or required to be licensed under the provisions of sections [192.2200](#) to [192.2260](#) in order to establish, conduct, or maintain an adult day care program;
- (9) "Participant", a functionally impaired adult who is enrolled in an adult day care program;
- (10) "Person", any individual, firm, corporation, partnership, association, agency, or an incorporated or unincorporated organization regardless of the name used;
- (11) "Related", any of the following by blood, marriage or adoption: parent, child, grandchild, brother, sister, half-brother, half-sister, stepparent, uncle, aunt, niece, nephew, or first cousin;
- (12) "Staff participant ratio", the number of adult care staff required by the department in relation to the number of adults being cared for by such staff;
- (13) "Substantial noncompliance", any violation of a class I or class II standard or twenty or more violations of class III standards.

(L. 1984 H.B. 1131 § 4, A.L. 2014 H.B. 1299 Revision § 192.1040 merged with S.B. 567 § 660.400)

*Transferred 2014; formerly 660.400

*Revisor's note: Definitions contained in section [192.2005](#) are also applicable to sections [192.2200](#) to [192.2260](#) .

License required to operate day care program--forms--documents--review--license validity period--temporary operating permit, when.

192.2205. 1. It shall be unlawful for any person to establish, maintain, or operate an adult day care program, or to advertise or hold himself or herself out as being able to perform any adult day care service, unless he or she has obtained the proper license.

2. All applications for licenses shall be made on forms provided by the department and in the manner prescribed by the department. All forms provided shall include a fee schedule.

3. The applicant shall submit all documents required by the department under this section attesting by signature that the statements contained in the application are true and correct to the best of the applicant's knowledge and belief, and that all required documents are either included with the application or are currently on file with the department.

4. Within ten working days of the effective date of any document that replaces, succeeds, or amends any of the documents required by the department to be filed pursuant to this section, an operator shall file with the department a copy of such document. The operator shall attest by signature that the document is true and correct.

5. If an operator fails to file documents or amendments to documents as required pursuant to this section and such failure is part of a pattern or practice of concealment, such failure shall be sufficient grounds for revocation of a license or disapproval of an application for a license.

6. Upon receipt of an application for a license to operate an adult day care program, the department shall review the application, investigate the applicant and the statements sworn to in the application for license and conduct any necessary inspections. A license shall be issued if the following requirements are met:

(1) The statements in the application are true and correct;

(2) The adult day care program and the operator are in substantial compliance with the provisions of sections [192.2200](#) to [192.2260](#) and the standards established thereunder;

(3) Neither the operator nor any principals in the operation of the adult day care program have ever been convicted of a felony offense concerning the operation of an adult day care program, long-term health care facility or other health care facility;

(4) Neither the operator or any principals in the operation of the adult day care program are listed

on the employee disqualification list maintained by the department; and

(5) All fees due to the state have been paid.

7. Such license shall be valid for the period designated by the department, which period shall not exceed two years from the date of issuance, for the premises and persons named in the application.

8. Upon denial of any application for a license, the department shall notify the applicant in writing, set forth therein the reasons and grounds for denial.

9. Each license issued under sections [192.2200](#) to [192.2260](#) shall include the name of the operator; the name of the adult day care program; the location of the adult day care program; the hours of operations; the number of participants who may be served; and the period for which such license is valid.

10. The department may grant an operator a temporary operating permit in order to allow for state review of the application and inspection for the purposes of relicensure if the application review and inspection process has not been completed prior to the expiration of a license and the applicant is not at fault for the failure to complete the application review and inspection process.

(L. 1984 H.B. 1131 § 5, A.L. 2014 H.B. 1299 Revision § 192.1042 merged with S.B. 567 § 660.403)

*Transferred 2014; formerly 660.403

Deficiencies, operator informed in exit interview, requirements--plan of correction--categories of standards established--inspection reports made available--notices required.

192.2210. 1. Whenever a duly authorized representative of the department finds upon an inspection of an adult day care program that it is not in compliance with the provisions of sections [192.2200](#) to [192.2260](#) and the standards established thereunder, the operator shall be informed of the deficiencies in an exit interview conducted with the operator or his designee. The department shall inform the operator or designee, in writing, of any violation of a class I standard at the time the determination is made. If there was a violation of any class I standard, immediate corrective action shall be taken by the operator or designee and a written plan of correction shall be submitted to the department. A written report shall be prepared of any deficiency and a copy of such report and a written correction order shall be sent to the operator or designee by certified mail or other delivery service that provides a dated receipt of delivery at the adult day care program

address within ten working days after the inspection, stating separately each deficiency and the specific statute or regulation violated.

2. The operator or designee shall have five working days following receipt of a written report and correction order regarding a violation of a class I standard and ten working days following receipt of the report and correction order regarding violations of class II or class III standards to submit a plan of correction for the department's approval which contains specific dates for achieving compliance. Within five working days after receiving a plan of correction regarding a violation of a class I standard and within ten working days after receiving a plan of correction regarding a violation of a class II or III standard, the department shall give its written approval or rejection of the plan.

3. If there was a violation of a class I standard, an unannounced reinspection shall be conducted within twenty calendar days of the exit interview to determine if deficiencies have been corrected. If there was a violation of any class II standard and the plan of correction is acceptable, an unannounced reinspection shall be conducted between forty and ninety calendar days from the date of the exit conference to determine the status of all previously cited deficiencies. If there was a violation of class III standards sufficient to establish that the adult day care program was not in substantial compliance, an unannounced reinspection shall be conducted within one hundred twenty days of the exit interview to determine the status of previously identified deficiencies.

4. In establishing standards for each type of adult day care program, the department shall classify the standards into three categories as follows:

(1) Class I standards are standards the violation of which would present either an imminent danger to the health, safety or welfare of any participant or a substantial probability that death or serious physical harm would result;

(2) Class II standards are standards which have a direct or immediate relationship to the health, safety or welfare of any participant, but which do not create imminent danger;

(3) Class III standards are standards which have an indirect or a potential impact on the health, safety or welfare of any participant.

5. Every adult day care program shall make available the most recent inspection report of the adult day care program. If the operator determines that the inspection report of the adult day care program contains individually identifiable health information,

the operator may redact such information prior to making the inspection report available.

6. If an adult day care program submits satisfactory documentation that establishes correction of any deficiency contained within the written report of deficiency required by this section*, an on-site revisit of such deficiency may not be required.

7. If, following the reinspection, the adult day care program is found not in substantial compliance with sections [192.2200](#) to [192.2260](#) and the standards established thereunder or the operator is not correcting the noncompliance in accordance with the plan of correction, the department shall issue a notice of noncompliance, which shall be sent by certified mail or other delivery service that provides a dated receipt of delivery to the operator of the adult day care program, according to the most recent information or documents on file with the department.

8. The notice of noncompliance shall inform the operator or administrator that the department may seek the imposition of any other action authorized by law.

9. At any time after an inspection is conducted, the operator may choose to enter into a consent agreement with the department to obtain a probationary license. The consent agreement shall include a provision that the operator will voluntarily surrender the license if substantial compliance is not reached in accordance with the terms and deadlines established under the agreement. The agreement shall specify the stages, actions and time span to achieve substantial compliance.

10. Whenever a notice of noncompliance has been issued, the operator shall post a copy of the notice of noncompliance and a copy of the most recent inspection report in a conspicuous location in the adult day care program, and the department shall send a copy of the notice of noncompliance to concerned federal, state or local governmental agencies.

(L. 2014 S.B. 567 § 660.404)

*Section "600.404", which does not exist, appears in original rolls.

Revocation of license, when--notification of operator.

192.2215. 1. The department may revoke a license in any case in which it finds that:

(1) The operator failed or refused to comply with class I or II standards, as established by the department pursuant to section [192.2210](#); or failed or refused to comply with class III

standards as established by the department pursuant to section 192.2210, where the aggregate effect of such noncompliances presents either an imminent danger to the health, safety or welfare of any participant or a substantial probability that death or serious physical harm would result;

(2) The operator refused to allow representatives of the department to inspect the adult day care program for compliance with standards or denied representatives of the department access to participants and employees necessary to carry out the duties set forth in this chapter and rules promulgated thereunder, except where employees of the adult day care program are in the process of rendering immediate care to a participant of such adult day care program;

(3) The operator demonstrated financial incapacity to operate and conduct the adult day care program in accordance with the provisions of sections 192.2200 to 192.2260;

(4) The operator or any principals in the operation of the adult day care program have ever been convicted of, or pled guilty or nolo contendere to a felony offense concerning the operation of an adult day care program, long-term health care facility or other health care facility; or

(5) The operator or any principals in the operation of the adult day care program are listed on the EDL maintained by the department.

2. Upon revocation of a license, the department shall so notify the operator in writing, setting forth the reason and grounds for the revocation. Notice of such revocation shall be sent either by certified mail, return receipt requested, to the operator at the address of the adult day care program, or served personally upon the operator. The department shall provide the operator notice of such revocation at least ten calendar days prior to its effective date.

(L. 2014 S.B. 567 § 660.405)

Exceptions to licensure requirements for adult day care centers.

192.2220. 1. The provisions of sections 192.2200 to 192.2260 shall not apply to the following:

(1) Any adult day care program operated by a person in which care is offered for no more than two hours per day;

(2) Any adult day care program maintained or operated by the federal government except where care is provided through a management contract;

(3) Any person who cares solely for persons related to the provider or who has been designated as guardian of that person;

(4) Any adult day care program which cares for no more than four persons unrelated to the provider;

(5) Any adult day care program licensed by the department of mental health under chapter 630 which provides care, treatment and habilitation exclusively to adults who have a primary diagnosis of mental disorder, mental illness, intellectual disability, or developmental disability as defined;

(6) Any adult day care program administered or maintained by a religious not-for-profit organization serving a social or religious function if the adult day care program does not hold itself out as providing the prescription or usage of physical or medical therapeutic activities or as providing or administering medicines or drugs.

2. Nothing in this section shall prohibit any person listed in subsection 1 of this section from applying for a license or receiving a license if the adult day care program owned or operated by such person conforms to the provisions of sections 192.2200 to 192.2260 and all applicable rules promulgated pursuant thereto.

(L. 1984 H.B. 1131 § 6, A.L. 2014 H.B. 1064 § 660.405 merged with H.B. 1299 Revision § 192.1044 merged with S.B. 567 § 660.406)

*Transferred 2014; formerly 660.405

Right to enter premises for compliance inspections or to investigate complaints--failure to permit, effect.

192.2225. 1. The department shall have the right to enter the premises of an applicant for or holder of a license at any time during the hours of operation of a center to determine compliance with provisions of sections 192.2200 to 192.2260 and applicable rules promulgated pursuant thereto. Entry shall also be granted for investigative purposes involving complaints regarding the operations of an adult day care program. The department shall make at least two inspections per year, at least one of which shall be unannounced to the operator or provider. The department may make such other inspections, announced or unannounced, as it deems necessary to carry out the provisions of sections 192.2200 to 192.2260.

2. The department may reduce the frequency of inspections to once a year if an adult day care program is found to be in substantial compliance. The

basis for such determination shall include, but not be limited to, the following:

- (1) Previous inspection reports;
- (2) The adult day care program's history of compliance with rules promulgated pursuant to this chapter; and
- (3) The number and severity of complaints received about the adult day care program.

3. The applicant for or holder of a license shall cooperate with the investigation and inspection by providing access to the adult day care program, records and staff, and by providing access to the adult day care program to determine compliance with the rules promulgated pursuant to sections [192.2200](#) to [192.2260](#).

4. Failure to comply with any lawful request of the department in connection with the investigation and inspection is a ground for refusal to issue a license or for the revocation of a license.

5. The department may designate to act for it, with full authority of law, any instrumentality of any political subdivision of the state of Missouri deemed by the department to be competent to investigate and inspect applicants for or holders of licenses.

(L. 1984 H.B. 1131 § 7, A.L. 2014 H.B. 1299 Revision § 192.1046 merged with S.B. 567 § 660.407)

*Transferred 2014; formerly 660.407

Fee for license or renewal, limitation.

192.2230. Each application for a license, or the renewal thereof, issued pursuant to sections [192.2200](#) to [192.2260](#) shall be accompanied by a nonrefundable fee in the amount required by the department. The fee, to be determined by the department, shall not exceed one hundred dollars and shall be based on the licensed capacity of the applicant.

(L. 1984 H.B. 1131 § 8, A.L. 2014 H.B. 1299 Revision § 192.1048 merged with S.B. 567 § 660.409)

*Transferred 2014; formerly 660.409

Adult daycare program manual--regional training sessions.

192.2235. The department shall create an adult day care program manual in partnership with the provider association to establish uniformity across the state and shall offer regional training sessions in order to provide technical assistance or consultation to assist applicants for or holders of licenses in meeting the requirements of sections [192.2200](#) to [192.2260](#), staff qualifications, and other aspects involving the operation of an adult day care program, and to assist

in the achievement of programs of excellence related to the provision of adult day care. The program manual and regional training sessions required under this section shall be made available to adult day care programs by January 1, 2015.

(L. 1984 H.B. 1131 § 9, A.L. 2014 H.B. 1299 Revision § 192.1050 merged with S.B. 567 § 660.411)

*Transferred 2014; formerly 660.411

Inspections, when--refusal to permit access, court order issued when--injunction authorized.

192.2240. 1. Whenever the department is advised or has reason to believe that any person is operating an adult day care program without a license, or that any holder of license is not in compliance with the provisions of sections [192.2200](#) to [192.2260](#), the department shall make an investigation and inspection to ascertain the facts. If the department is not permitted access to the adult day care program in question, the department may apply to the circuit court of the county in which the program is located for an order authorizing entry for inspection. The court shall issue the order if it finds reasonable grounds necessitating the inspection.

2. If the department finds that the adult day care program is being operated in violation of sections [192.2200](#) to [192.2260](#), it may seek, among other remedies, injunctive relief against the adult day care program.

(L. 1984 H.B. 1131 § 10, A.L. 2014 H.B. 1299 Revision § 192.1052 merged with S.B. 567 § 660.414)

*Transferred 2014; formerly 660.414

License denied--suspended--revoked--hearing procedure--appeals.

192.2245. 1. Any person aggrieved by an official action of the department either refusing to issue a license or revoking a license may seek a determination thereon by the administrative hearing commission pursuant to the provisions of section [621.045](#); except that, the petition must be filed with the administrative hearing commission within thirty calendar days after the delivery of notice to the applicant for or holder of such license or certificate. When the notification of the official action is mailed to the applicant for or holder of such a license, there shall be included in the notice a statement of the procedure whereby the applicant for or holder of such license may appeal the decision of the department before the administrative hearing commission. It shall not be a condition to such determination that the person aggrieved seek a

reconsideration, a rehearing or exhaust any other procedure within the department.

2. The administrative hearing commission may stay the revocation of such certificate or license, pending the commission's findings and determination in the cause, upon such conditions as the commission deems necessary and appropriate including the posting of bond or other security; except that, the commission shall not grant a stay or if a stay has already been entered shall set aside its stay, if, upon application of the department, the commission finds reason to believe that continued operation of the adult day care program to which the certificate or license in question applies pending the commission's final determination would present an imminent danger to the health, safety or welfare of any person or a substantial probability that death or serious physical harm would result. In any case in which the department has refused to issue a certificate or license, the commission shall have no authority to stay or to require the issuance of a license pending final determination by the commission.

3. The administrative hearing commission shall make the final decision as to the issuance or revocation of a license. Any person aggrieved by a final decision of the administrative hearing commission, including the department, may seek judicial review of such decision by filing a petition for review in the court of appeals for the district in which the adult day care program to which the license in question applies is located. Review shall be had, except as provided in this section, in accordance with the provisions of sections 621.189 and 621.193.

(L. 1984 H.B. 1131 § 11, A.L. 2014 H.B. 1299 Revision § 192.1054 merged with S.B. 567 § 660.416)

*Transferred 2014; formerly 660.416

Rulemaking authority.

192.2250. The department shall promulgate reasonable standards and regulations for adult day care programs. The standards and regulations shall relate to licensure requirements, staffing requirements, program policies and participant care requirements, participant right requirements, record keeping requirements, fire safety requirements and physical plant requirements.

(L. 2014 S.B. 567 § 660.417)

Rules, authority, procedure.

192.2255. The department shall have the authority to promulgate rules pursuant to this section and chapter 536 in order to carry out the provisions of sections 192.2200 to 192.2260. No rule or portion of a rule promulgated under the authority of **

sections 192.2200 to 192.2260 shall become effective unless it has been promulgated pursuant to the provisions of section 536.024.

(L. 1984 H.B. 1131 § 12, A.L. 1993 S.B. 52, A.L. 1995 S.B. 3, A.L. 2014 H.B. 1299 Revision § 192.1056 merged with S.B. 567 § 660.418)

*Transferred 2014; formerly 660.418

**Word "section" appears here in original rolls of S.B. 567 § 660.418, 2014.

Violations, penalties.

192.2260. 1. Any person who violates any provision of sections 192.2200 to 192.2260, or who, for himself or for any other person, makes materially false statements in order to obtain a certificate or license, or the renewal thereof, issued pursuant to sections 192.2200 to 192.2260, shall be guilty of a class A misdemeanor. Any person violating this subsection wherein abuse or neglect of a participant of the program has occurred is guilty of a class E felony.

2. Any person who is convicted pursuant to this section shall, in addition to all other penalties provided by law, have any license issued to him under sections 192.2200 to 192.2260 revoked, and shall not operate, nor hold any license to operate, any adult day care program, or other entity governed by the provisions of sections 192.2200 to 192.2260 for a period of three years after such conviction.

(L. 1984 H.B. 1131 § 13, A.L. 2014 H.B. 1299 Revision § 192.1058 merged with S.B. 567 § 660.420, A.L. 2016 H.B. 2332)

Effective 1-01-17

*Transferred 2014; formerly 660.420

Inspections and plans of correction to be provided on department website, exceptions.

192.2265. 1. The department may provide through its internet website:

(1) The most recent inspection of every adult day care program licensed in this state and any such findings of deficiencies and the effect the deficiency would have on such program. If such inspection is in dispute, the inspection shall not be posted on the website until the program's informal dispute resolution process resolves the dispute; and

(2) The program's proposed plan of correction.

2. Nothing in this section shall be construed as requiring the department to post any information on its internet website that is prohibited from disclosure pursuant to the federal Health Insurance Portability and Accountability Act, as amended.

(L. 2014 S.B. 567 § 660.422)

Dispute resolution, department may contract with third parties--definitions--requirements--rulemaking authority.

192.2270. 1. As used in this section, the following terms shall mean:

- (1) "Deficiency", a program's failure to meet a participation requirement or standard supported by evidence gathered from observation, interview, or record review;
- (2) "IDR", informal dispute resolution as provided for in this section;
- (3) "Independent third party", the federally designated Medicare Quality Improvement Organization in this state;
- (4) "Plan of correction", a program's response to deficiencies which explains how corrective action will be accomplished, how the program will identify other participants who may be affected by the deficiency practice, what measures will be used or systemic changes made to ensure that the deficient practice will not reoccur, and how the program will monitor to ensure that solutions are sustained.

2. The department may contract with an independent third party to conduct informal dispute resolution (IDR) for programs licensed under sections [192.2205](#) to [192.2260](#). The IDR process, including conferences, shall constitute an informal administrative process and shall not be construed to be a formal evidentiary hearing. Use of IDR under this section shall not waive the program's right to pursue further or additional legal actions.

3. The department shall establish an IDR process to determine whether a cited deficiency as evidenced by a statement of deficiencies against a program shall be upheld. The IDR process shall include the following minimum requirements:

- (1) Within ten working days of the end of the inspection, the department shall transmit to the program a statement of deficiencies committed by the program. Notification of the availability of an IDR and IDR process shall be included in the transmittal;
- (2) Within ten working days of receipt of the statement of deficiencies, the program shall return a plan of correction to the department. Within such ten-day period, the program may request in writing an IDR conference to refute the deficiencies cited in the statement of deficiencies;

(3) Within ten working days of receipt for an IDR conference made by an adult day care program, the department shall hold an IDR conference unless otherwise requested by the program. The IDR conference shall provide the program with an opportunity to provide additional information or clarification in support of the program's contention that the deficiencies were erroneously cited. The program may be accompanied by counsel during the IDR conference. The type of IDR held shall be at the discretion of the program, but shall be limited to:

- (a) A desk review of written information submitted by the program; or
- (b) A telephonic conference; or
- (c) A face-to-face conference.

4. Within ten calendar days of the IDR conference described in subsection 3 of this section, the department shall make a determination, based upon the facts and findings presented, and shall transmit the decision and rationale for the outcome in writing to the program.

5. If the original statement of deficiencies should be changed as a result of the IDR conference, the department shall transmit a revised statement of deficiencies to the program with the notification of the determination within ten calendar days of the decision to change the statement of deficiencies.

6. Within ten working days of receipt of the determination and the revised statement of deficiencies, the program shall submit a plan of correction to the department.

7. The department shall not post on its website any information about the deficiencies which are in dispute unless the dispute determination is made and the program has responded with a revised plan of correction, if needed.

8. Any rule or portion of a rule, as that term is defined in section [536.010](#), that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section [536.028](#). This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2014, shall be invalid and void.

(L. 2014 S.B. 567 § 660.423)

Cost-based uniform rate for services, budget line item.

192.2275. Adult day care programs licensed under sections 192.2205 to 192.2260 shall evaluate the program rate structure in FY 2015 and determine a cost-based uniform rate for services to be presented as a budget line item in the department of health and senior services' FY 2016 budget request for adult day programs which provide care, treatment, rehabilitation, and habilitation exclusively to adults and seniors with physical disabilities, mental, neurological, and cognitive disorders such as brain injuries, dementia, and other intellectual impairments, excluding in the budget request the cost for individuals already funded by a department of mental health waiver.

(L. 2014 S.B. 567 § 660.424)

Report of abuse or neglect of in-home services or home health agency client, duty--penalty--contents of report--investigation, procedure--confidentiality of report--immunity--retaliation prohibited, penalty--employee disqualification list--safe at home evaluations, procedure.

192.2475. 1. When any adult day care worker; chiropractor; Christian Science practitioner; coroner; dentist; embalmer; emergency medical technician; employee of the departments of social services, mental health, or health and senior services; employee of a local area agency on aging or an organized area agency on aging program; firefighter; first responder, as defined in section 192.2405; funeral director; home health agency or home health agency employee; hospital and clinic personnel engaged in examination, care, or treatment of persons; in-home services owner, provider, operator, or employee; law enforcement officer; long-term care facility administrator or employee; medical examiner; medical resident or intern; mental health professional; minister; nurse; nurse practitioner; optometrist; other health practitioner; peace officer; pharmacist; physical therapist; physician; physician's assistant; podiatrist; probation or parole officer; psychologist; or social worker has reasonable cause to believe that an in-home services client has been abused or neglected, as a result of in-home services, he or she shall immediately report or cause a report to be made to the department. If the report is made by a physician of the in-home services client, the department shall maintain contact with the physician regarding the progress of the investigation.

2. Any person required in subsection 1 of this section to report or cause a report to be made to the department who fails to do so within a reasonable time after the act of abuse or neglect is guilty of a class A misdemeanor.

3. The report shall contain the names and addresses of the in-home services provider agency, the in-home services employee, the in-home services client, the home health agency, the home health agency employee, information regarding the nature of the abuse or neglect, the name of the complainant, and any other information which might be helpful in an investigation.

4. In addition to those persons required to report under subsection 1 of this section, any other person having reasonable cause to believe that an in-home services client or home health patient has been abused or neglected by an in-home services employee or home health agency employee may report such information to the department.

5. If the investigation indicates possible abuse or neglect of an in-home services client or home health patient, the investigator shall refer the complaint together with his or her report to the department director or his or her designee for appropriate action. If, during the investigation or at its completion, the department has reasonable cause to believe that immediate action is necessary to protect the in-home services client or home health patient from abuse or neglect, the department or the local prosecuting attorney may, or the attorney general upon request of the department shall, file a petition for temporary care and protection of the in-home services client or home health patient in a circuit court of competent jurisdiction. The circuit court in which the petition is filed shall have equitable jurisdiction to issue an ex parte order granting the department authority for the temporary care and protection of the in-home services client or home health patient, for a period not to exceed thirty days.

6. Reports shall be confidential, as provided under section 192.2500.

7. Anyone, except any person who has abused or neglected an in-home services client or home health patient, who makes a report pursuant to this section or who testifies in any administrative or judicial proceeding arising from the report shall be immune from any civil or criminal liability for making such a report or for testifying except for liability for perjury, unless such person acted negligently, recklessly, in bad faith, or with malicious purpose.

8. Within five working days after a report required to be made under this section is received, the person

making the report shall be notified in writing of its receipt and of the initiation of the investigation.

9. No person who directs or exercises any authority in an in-home services provider agency or home health agency shall harass, dismiss or retaliate against an in-home services client or home health patient, or an in-home services employee or a home health agency employee because he or she or any member of his or her family has made a report of any violation or suspected violation of laws, standards or regulations applying to the in-home services provider agency or home health agency or any in-home services employee or home health agency employee which he or she has reasonable cause to believe has been committed or has occurred.

10. Any person who abuses or neglects an in-home services client or home health patient is subject to criminal prosecution under section 565.184. If such person is an in-home services employee and has been found guilty by a court, and if the supervising in-home services provider willfully and knowingly failed to report known abuse by such employee to the department, the supervising in-home services provider may be subject to administrative penalties of one thousand dollars per violation to be collected by the department and the money received therefor shall be paid to the director of revenue and deposited in the state treasury to the credit of the general revenue fund. Any in-home services provider which has had administrative penalties imposed by the department or which has had its contract terminated may seek an administrative review of the department's action pursuant to chapter 621. Any decision of the administrative hearing commission may be appealed to the circuit court in the county where the violation occurred for a trial de novo. For purposes of this subsection, the term "violation" means a determination of guilt by a court.

11. The department shall establish a quality assurance and supervision process for clients that requires an in-home services provider agency to conduct random visits to verify compliance with program standards and verify the accuracy of records kept by an in-home services employee.

12. The department shall maintain the employee disqualification list and place on the employee disqualification list the names of any persons who have been finally determined by the department, pursuant to section 192.2490, to have recklessly, knowingly or purposely abused or neglected an in-home services client or home health patient while employed by an in-home services provider agency or home health agency. For purposes of this section only, "knowingly" and "recklessly" shall have the

meanings that are ascribed to them in this section. A person acts "knowingly" with respect to the person's conduct when a reasonable person should be aware of the result caused by his or her conduct. A person acts "recklessly" when the person consciously disregards a substantial and unjustifiable risk that the person's conduct will result in serious physical injury and such disregard constitutes a gross deviation from the standard of care that a reasonable person would exercise in the situation.

13. At the time a client has been assessed to determine the level of care as required by rule and is eligible for in-home services, the department shall conduct a safe at home evaluation to determine the client's physical, mental, and environmental capacity. The department shall develop the safe at home evaluation tool by rule in accordance with chapter 536. The purpose of the safe at home evaluation is to assure that each client has the appropriate level of services and professionals involved in the client's care. The plan of service or care for each in-home services client shall be authorized by a nurse. The department may authorize the licensed in-home services nurse, in lieu of the department nurse, to conduct the assessment of the client's condition and to establish a plan of services or care. The department may use the expertise, services, or programs of other departments and agencies on a case-by-case basis to establish the plan of service or care. The department may, as indicated by the safe at home evaluation, refer any client to a mental health professional, as defined in 9 CSR 30-4.030, for evaluation and treatment as necessary.

14. Authorized nurse visits shall occur at least twice annually to assess the client and the client's plan of services. The provider nurse shall report the results of his or her visits to the client's case manager. If the provider nurse believes that the plan of service requires alteration, the department shall be notified and the department shall make a client evaluation. All authorized nurse visits shall be reimbursed to the in-home services provider. All authorized nurse visits shall be reimbursed outside of the nursing home cap for in-home services clients whose services have reached one hundred percent of the average statewide charge for care and treatment in an intermediate care facility, provided that the services have been preauthorized by the department.

15. All in-home services clients shall be advised of their rights by the department or the department's designee at the initial evaluation. The rights shall include, but not be limited to, the right to call the department for any reason, including dissatisfaction with the provider or services. The department may contract for services relating to receiving such

complaints. The department shall establish a process to receive such nonabuse and neglect calls other than the elder abuse and neglect hotline.

16. Subject to appropriations, all nurse visits authorized in sections 192.2400 to 192.2475 shall be reimbursed to the in-home services provider agency.

(L. 1992 S.B. 573 & 634, A.L. 2003 S.B. 556 & 311, A.L. 2003 2nd Ex. Sess. S.B. 4, A.L. 2010 S.B. 842, et al. merged with S.B. 1007, A.L. 2014 H.B. 1299 Revision § 192.1102 merged with S.B. 491 § 197.1030, A.L. 2016 H.B. 2332 merged with S.B. 732)

Effective 1-01-17

Transferred 2014; formerly 660.300

Employee disqualification list, notification of placement, contents--challenge of allegation, procedure--hearing, procedure--appeal--removal of name from list--list provided to whom--prohibition of employment.

192.2490. 1. After an investigation and a determination has been made to place a person's name on the employee disqualification list, that person shall be notified in writing mailed to his or her last known address that:

- (1) An allegation has been made against the person, the substance of the allegation and that an investigation has been conducted which tends to substantiate the allegation;
- (2) The person's name will be included in the employee disqualification list of the department;
- (3) The consequences of being so listed including the length of time to be listed; and
- (4) The person's rights and the procedure to challenge the allegation.

2. If no reply has been received within thirty days of mailing the notice, the department may include the name of such person on its list. The length of time the person's name shall appear on the employee disqualification list shall be determined by the director or the director's designee, based upon the criteria contained in subsection 9 of this section.

3. If the person so notified wishes to challenge the allegation, such person may file an application for a hearing with the department. The department shall grant the application within thirty days after receipt by the department and set the matter for hearing, or the department shall notify the applicant that, after review, the allegation has been held to be unfounded and the applicant's name will not be listed.

4. If a person's name is included on the employee disqualification list without the department providing notice as required under subsection 1 of this section,

such person may file a request with the department for removal of the name or for a hearing. Within thirty days after receipt of the request, the department shall either remove the name from the list or grant a hearing and set a date therefor.

5. Any hearing shall be conducted in the county of the person's residence by the director of the department or the director's designee. The provisions of chapter 536 for a contested case except those provisions or amendments which are in conflict with this section shall apply to and govern the proceedings contained in this section and the rights and duties of the parties involved. The person appealing such an action shall be entitled to present evidence, pursuant to the provisions of chapter 536, relevant to the allegations.

6. Upon the record made at the hearing, the director of the department or the director's designee shall determine all questions presented and shall determine whether the person shall be listed on the employee disqualification list. The director of the department or the director's designee shall clearly state the reasons for his or her decision and shall include a statement of findings of fact and conclusions of law pertinent to the questions in issue.

7. A person aggrieved by the decision following the hearing shall be informed of his or her right to seek judicial review as provided under chapter 536. If the person fails to appeal the director's findings, those findings shall constitute a final determination that the person shall be placed on the employee disqualification list.

8. A decision by the director shall be inadmissible in any civil action brought against a facility or the in-home services provider agency and arising out of the facts and circumstances which brought about the employment disqualification proceeding, unless the civil action is brought against the facility or the in-home services provider agency by the department of health and senior services or one of its divisions.

9. The length of time the person's name shall appear on the employee disqualification list shall be determined by the director of the department of health and senior services or the director's designee, based upon the following:

- (1) Whether the person acted recklessly or knowingly, as defined in chapter 562;
- (2) The degree of the physical, sexual, or emotional injury or harm; or the degree of the imminent danger to the health, safety or welfare of a resident or in-home services client;

- (3) The degree of misappropriation of the property or funds, or falsification of any documents for service delivery of an in-home services client;
- (4) Whether the person has previously been listed on the employee disqualification list;
- (5) Any mitigating circumstances;
- (6) Any aggravating circumstances; and
- (7) Whether alternative sanctions resulting in conditions of continued employment are appropriate in lieu of placing a person's name on the employee disqualification list. Such conditions of employment may include, but are not limited to, additional training and employee counseling. Conditional employment shall terminate upon the expiration of the designated length of time and the person's submitting documentation which fulfills the department of health and senior services' requirements.

10. The removal of any person's name from the list under this section shall not prevent the director from keeping records of all acts finally determined to have occurred under this section.

11. The department shall provide the list maintained pursuant to this section to other state departments upon request and to any person, corporation, organization, or association who:

- (1) Is licensed as an operator under chapter 198;
- (2) Provides in-home services under contract with the department of social services or its divisions;
- (3) Employs nurses and nursing assistants for temporary or intermittent placement in health care facilities;
- (4) Is approved by the department to issue certificates for nursing assistants training;
- (5) Is an entity licensed under chapter 197;
- (6) Is a recognized school of nursing, medicine, or other health profession for the purpose of determining whether students scheduled to participate in clinical rotations with entities described in subdivision (1), (2), or (5) of this subsection are included in the employee disqualification list; or
- (7) Is a consumer reporting agency regulated by the federal Fair Credit Reporting Act that conducts employee background checks on behalf of entities listed in subdivisions (1), (2), (5), or (6) of this subsection. Such a consumer reporting agency shall conduct the employee disqualification list check only upon the initiative

or request of an entity described in subdivisions (1), (2), (5), or (6) of this subsection when the entity is fulfilling its duties required under this section. The information shall be disclosed only to the requesting entity. The department shall inform any person listed above who inquires of the department whether or not a particular name is on the list. The department may require that the request be made in writing. No person, corporation, organization, or association who is entitled to access the employee disqualification list may disclose the information to any person, corporation, organization, or association who is not entitled to access the list. Any person, corporation, organization, or association who is entitled to access the employee disqualification list who discloses the information to any person, corporation, organization, or association who is not entitled to access the list shall be guilty of an infraction.

- 12. No person, corporation, organization, or association who received the employee disqualification list under subdivisions (1) to (7) of subsection 11 of this section shall knowingly employ any person who is on the employee disqualification list. Any person, corporation, organization, or association who received the employee disqualification list under subdivisions (1) to (7) of subsection 11 of this section, or any person responsible for providing health care service, who declines to employ or terminates a person whose name is listed in this section shall be immune from suit by that person or anyone else acting for or in behalf of that person for the failure to employ or for the termination of the person whose name is listed on the employee disqualification list.
- 13. Any employer or vendor as defined in sections 197.250, 197.400, 198.006, 208.900, or 192.2400 required to deny employment to an applicant or to discharge an employee, provisional or otherwise, as a result of information obtained through any portion of the background screening and employment eligibility determination process under section 210.903, or subsequent, periodic screenings, shall not be liable in any action brought by the applicant or employee relating to discharge where the employer is required by law to terminate the employee, provisional or otherwise, and shall not be charged for unemployment insurance benefits based on wages paid to the employee for work prior to the date of discharge, pursuant to section 288.100, if the employer terminated the employee because the employee:

- (1) Has been found guilty, pled guilty or nolo contendere in this state or any other state of a

crime as listed in subsection 6 of section [192.2495](#);

(2) Was placed on the employee disqualification list under this section after the date of hire;

(3) Was placed on the employee disqualification registry maintained by the department of mental health after the date of hire;

(4) Has a disqualifying finding under this section, section [192.2495](#), or is on any of the background check lists in the family care safety registry under sections [210.900](#) to [210.936](#); or

(5) Was denied a good cause waiver as provided for in subsection 10 of section [192.2495](#).

14. Any person who has been listed on the employee disqualification list may request that the director remove his or her name from the employee disqualification list. The request shall be written and may not be made more than once every twelve months. The request will be granted by the director upon a clear showing, by written submission only, that the person will not commit additional acts of abuse, neglect, misappropriation of the property or funds, or the falsification of any documents of service delivery to an in-home services client. The director may make conditional the removal of a person's name from the list on any terms that the director deems appropriate, and failure to comply with such terms may result in the person's name being relisted. The director's determination of whether to remove the person's name from the list is not subject to appeal.

(L. 1992 S.B. 573 & 634, A.L. 2003 S.B. 556 & 311, A.L. 2007 S.B. 272, A.L. 2012 H.B. 1563, A.L. 2013 S.B. 127, A.L. 2014 H.B. 1299 Revision § 192.1108 merged with S.B. 491 § 197.1036, A.L. 2014 H.B. 1299 Revision § 192.1108 merged with H.B. 1371 § 197.1036)

Effective 8-28-14 (H.B. 1299 Revision)

1-01-17 (H.B. 1371)

*Transferred 2014; formerly 660.315

Criminal background checks of employees, required when--persons with criminal history not to be hired, when, penalty--failure to disclose, penalty--improper hirings, penalty--definitions--rules to waive hiring restrictions.

192.2495. 1. For the purposes of this section, the term "provider" means any person, corporation or association who:

(1) Is licensed as an operator pursuant to [chapter 198](#);

(2) Provides in-home services under contract with the department of social services or its divisions;

(3) Employs health care providers as defined in section [376.1350](#) for temporary or intermittent placement in health care facilities;

(4) Is an entity licensed pursuant to [chapter 197](#);

(5) Is a public or private facility, day program, residential facility or specialized service operated, funded or licensed by the department of mental health; or

(6) Is a licensed adult day care provider.

2. For the purpose of this section "patient or resident" has the same meaning as such term is defined in section [43.540](#).

3. Prior to allowing any person who has been hired as a full-time, part-time or temporary position to have contact with any patient or resident the provider shall, or in the case of temporary employees hired through or contracted for an employment agency, the employment agency shall prior to sending a temporary employee to a provider:

(1) Request a criminal background check as provided in section [43.540](#). Completion of an inquiry to the highway patrol for criminal records that are available for disclosure to a provider for the purpose of conducting an employee criminal records background check shall be deemed to fulfill the provider's duty to conduct employee criminal background checks pursuant to this section; except that, completing the inquiries pursuant to this subsection shall not be construed to exempt a provider from further inquiry pursuant to common law requirements governing due diligence. If an applicant has not resided in this state for five consecutive years prior to the date of his or her application for employment, the provider shall request a nationwide check for the purpose of determining if the applicant has a prior criminal history in other states. The fingerprint cards and any required fees shall be sent to the highway patrol's central repository. The fingerprints shall be used for searching the state repository of criminal history information. If no identification is made, fingerprints shall be forwarded to the Federal Bureau of Investigation for the searching of the federal criminal history files. The patrol shall notify the submitting state agency of any criminal history information or lack of criminal history information discovered on the individual. The provisions relating to applicants for employment who have not resided in this state for five consecutive years shall apply only to persons who have no employment history with a licensed Missouri facility during that five-year period. Notwithstanding the provisions of

section [610.120](#), all records related to any criminal history information discovered shall be accessible and available to the provider making the record request; and

(2) Make an inquiry to the department of health and senior services whether the person is listed on the employee disqualification list as provided in section [192.2490](#).

4. When the provider requests a criminal background check pursuant to section 43.540, the requesting entity may require that the applicant reimburse the provider for the cost of such record check. When a provider requests a nationwide criminal background check pursuant to subdivision (1) of subsection 3 of this section, the total cost to the provider of any background check required pursuant to this section shall not exceed five dollars which shall be paid to the state. State funding and the obligation of a provider to obtain a nationwide criminal background check shall be subject to the availability of appropriations.

5. An applicant for a position to have contact with patients or residents of a provider shall:

(1) Sign a consent form as required by section [43.540](#) so the provider may request a criminal records review;

(2) Disclose the applicant's criminal history. For the purposes of this subdivision "**criminal history**" includes any conviction or a plea of guilty to a misdemeanor or felony charge and shall include any suspended imposition of sentence, any suspended execution of sentence or any period of probation or parole;

(3) Disclose if the applicant is listed on the employee disqualification list as provided in section [192.2490](#); and

(4) Disclose if the applicant is listed on any of the background checks in the family care safety registry established under section [210.903](#). A provider not otherwise prohibited from employing an individual listed on such background checks may deny employment to an individual listed on any of the background checks in such registry.

6. An applicant who knowingly fails to disclose his or her criminal history as required in subsection 5 of this section is guilty of a class A misdemeanor. A provider is guilty of a class A misdemeanor if the provider knowingly hires or retains a person to have contact with patients or residents and the person has been found guilty in this state or any other state or has been found guilty of a crime, which if committed in Missouri would be a class A or B felony violation

of [chapter 565](#), [566](#) or [569](#), or any violation of subsection 3 of section [198.070](#) or section [568.020](#).

7. Any in-home services provider agency or home health agency shall be guilty of a class A misdemeanor if such agency knowingly employs a person to provide in-home services or home health services to any in-home services client or home health patient and such person either refuses to register with the family care safety registry or if such person:

- (1) Has any of the disqualifying factors listed in subsection 6 of this section;
- (2) Has been found guilty of or pleaded guilty or nolo contendere to any felony offense under chapter ^{*} 195 or 579;
- (3) Has been found guilty of or pleaded guilty or nolo contendere to any felony offense under section [568.045](#), [568.050](#), [568.060](#), [568.175](#), [570.023](#), [570.025](#), [570.030](#), [570.040](#) as it existed prior to January 1, 2017, [570.090](#), [570.145](#), [570.223](#), [575.230](#), or [576.080](#);
- (4) Has been found guilty of or pleaded guilty or nolo contendere to a violation of section [577.010](#) or [577.012](#) and who is alleged and found by the court to be an aggravated or chronic offender under section [577.023](#);
- (5) Has been found guilty of or pleaded guilty or nolo contendere to any offense requiring registration under section [589.400](#);
- (6) Is listed on the department of health and senior services employee disqualification list under section [192.2490](#);
- (7) Is listed on the department of mental health employee disqualification registry under section [630.170](#); or
- (8) Has a finding on the child abuse and neglect registry under sections [210.109](#) to [210.183](#).

8. The highway patrol shall examine whether protocols can be developed to allow a provider to request a statewide fingerprint criminal records review check through local law enforcement agencies.

9. A provider may use a private investigatory agency rather than the highway patrol to do a criminal history records review check, and alternatively, the applicant pays the private investigatory agency such fees as the provider and such agency shall agree.

10. Except for the hiring restriction based on the department of health and senior services employee disqualification list established pursuant to

section [192.2490](#), the department of health and senior services shall promulgate rules and regulations to waive the hiring restrictions pursuant to this section for good cause. For purposes of this section, "good cause" means the department has made a determination by examining the employee's prior work history and other relevant factors that such employee does not present a risk to the health or safety of residents.

(L. 1996 H.B. 1362, A.L. 1997 S.B. 358, A.L. 1998 H.B. 1046 merged with H.B. 1907, A.L. 2003 S.B. 556 & 311, A.L. 2003 2nd Ex. Sess. S.B. 4, A.L. 2014 H.B. 1299 Revision § 192.1110 merged with S.B. 491 § 197.1038, A.L. 2016 S.B. 635, A.L. 2018 H.B. 1350)

Effective 8-28-18

*Section 210.937 was repealed by S.B. 184, 2003.

Transferred 2014; formerly 660.317

Prohibition against disclosure of reports, exceptions--employment security provided reports upon request.

192.2500. 1. Reports confidential under section [198.070](#) and sections [192.2475](#) to [192.2490](#) shall not be deemed a public record and shall not be subject to the provisions of section [109.180](#) or chapter 610. The name of the complainant or any person mentioned in the reports shall not be disclosed unless:

- (1) The complainant, resident or the in-home services client mentioned agrees to disclosure of his or her name;
- (2) The department determines that disclosure is necessary in order to prevent further abuse, neglect, misappropriation of property or funds, or falsification of any documents verifying service delivery to an in-home services client;
- (3) Release of a name is required for conformance with a lawful subpoena;
- (4) Release of a name is required in connection with a review by the administrative hearing commission in accordance with section [198.039](#);
- (5) The department determines that release of a name is appropriate when forwarding a report of findings of an investigation to a licensing authority; or
- (6) Release of a name is requested for the purpose of licensure under chapter 210.

2. The department shall, upon request, provide to the division of employment security within the department of labor and industrial relations copies of the investigative reports that led to an employee being placed on the disqualification list.

(L. 1992 S.B. 573 & 634, A.L. 2003 S.B. 556 & 311, A.L. 2014 H.B. 1299 Revision § 192.1112 merged with S.B. 491 § 197.1040)

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Missouri General Assembly
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Refer to the official Missouri Revised Statutes, which can be found at the Missouri General Assembly website: <http://www.moga.mo.gov/>

Missouri Revised Statutes

Chapter 198
Convalescent, Nursing and Boarding Homes

←198.510

Section 198.515.1

198.525→

August 28, 2014

Alzheimer's facilities, informational documents required--department, duties--licensing department, verification.

198.515. Any facility which offers to provide or provides care for persons with Alzheimer's disease by means of an Alzheimer's special care unit or Alzheimer's special care program shall be required to provide an informational document developed by or approved by the department of health and senior services. The document shall include but is not limited to updated information on selecting an Alzheimer's special care unit or Alzheimer's special care program. The document shall be given to any person seeking information about or placement in an Alzheimer's special care unit or Alzheimer's special care program. The distribution of this document shall be verified by the licensing department as part of the facility's regular license renewal procedure.

(L. 1996 H.B. 781 § 4, A.L. 2014 H.B. 1299 Revision)

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